FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OIVID APPROVAL									
l	OMB Number:	3235-0287								
l	Estimated average burde	n								
I	hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* MANIAS WILLIAM G					2. Issuer Name and Ticker or Trading Symbol <u>USA Compression Partners, LP</u> [USAC]							(Ch	elationship of eck all applica Director Officer (below)	ble)	Persor	10% Owr Other (sp	ner
(Last) (First) (Middle) C/O USA COMPRESSION PARTNERS, LP					3. Date of Earliest Transaction (Month/Day/Year) 02/12/2018							See Remarks					
100 CONGRESS AVENUE, SUITE 450				4	If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable					
(Street) AUSTIN	I T.	X	78701	_						Line	Form filed by One Reporting Person Form filed by More than One Reporting Person				ng		
(City)	(S	tate)	(Zip)														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Trans: Date (Month/I				ate	action ZA. Deemed Execution Date if any (Month/Day/Yea		Date	e, Transaction I Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			Beneficial Owned Fo	Form y (D) or		Direct Ir Indirect B tr. 4)	7. Nature of ndirect Beneficial Ownership
							Code	v	Amount	(A) or (D)	Price	Transaction	Reported Transaction(s) (Instr. 3 and 4)			nstr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year) 3. Deemed Execution Date, if any (Month/Day/Year) 4. Transactic Code (Ins			ction Derivative Expiration			Date			ies g Derivative	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount o Number o Shares		(Instr. 4)	(0)		
Phantom Units	(1)	02/12/2018		A		43,879		(2)		(3)	Common Units	43,879	\$0	43,879		D	
Phantom Units	(1)	02/12/2018		A		10,970 ⁽⁴⁾		02/15/2021	4)	(3)	Common Units	10,970(4	\$0	10,970		D	

Explanation of Responses:

- 1. Each phantom unit is the economic equivalent of one common unit of the Issuer.
- 2. The phantom units shall vest in three equal annual installments, with the first installment vesting on February 15, 2019.
- 3. In the event of cessation of the Reporting Person's services for any reason, all phantom units that have not vested prior to or in connection with such cessation of service shall automatically be forfeited.
- 4. The number of phantom units that vest on February 15, 2021 will range between 0% and 200% of the reported number of phantom units generally depending on the Issuer's achievement of certain objective, performance-based criteria during the three years prior to the vesting date. If none or only a portion of phantom units vest as a result of specified performance levels not being met, such number of phantom units that fail to vest will be forfeited. The phantom units shall also vest immediately prior to a change in control regarding the Issuer.

Remarks:

The Reporting Person is the Vice President and Chief Operating Officer of USA Compression GP, LLC, the general partner of the Issuer (the "General Partner"). The Issuer is managed by the directors and executive officers of the General Partner.

/s/ William G. Manias

** Signature of Reporting Person

02/14/2018 Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.