FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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	OMB APPROVAL					
FICIAL OWNERSHIP	OMB Number:	3235-0287				

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0.5

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(0). 0	ee instruction i	0.																
1. Name and Address of Reporting Person* Joyce Glenn E.		2. Issuer Name and Ticker or Trading Symbol USA Compression Partners, LP [USAC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
Joyce Gleilli E.								_,		1	1	Direc	tor		10% Ow	/ner		
(Last) (First) (Middle) C/O USA COMPRESSION PARTNERS, LP				3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025								Office below	cer (give title w)		Other (specify below)			
			1	·I														
111 CON	IGRESS AV	VENUE, SUITE	2400		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	KT I	7	8701										✓		filed by One		•	
———		,	0701											Perso	filed by Moi on	re tnar	n One Repo	orting
(City)	(St	ate) (Z	Zip)															
		Table	I - Noi	n-Deriva	tive S	ecuriti	es Acq	uired,	Dis	oosed of	, or E	Benefi	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			, 4 and Securities Beneficially Owned Followi		ties cially Following	6. Ownersh Form: Dire (D) or Indir (I) (Instr. 4)	: Direct or Indirect str. 4)	of Indirect ct Beneficia Ownersh					
								v	Amount	(A) (D)	or Pr	ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Units 01/02/2					2025			A		4,494(1)	P	A	\$ <mark>0</mark>	49,115			D	
		Tal								osed of, o				Owne	d			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Executi if any	a. Deemed ecution Date, any onth/Day/Year) 4. Tran Code 8)		of of De Se Ac (A Di of (In	ion of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)			y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indired Beneficia Ownersh (Instr. 4)
				Ī								Amou	nt					
												Or						

Explanation of Responses:

1. An award of Restricted Units granted under the USA Compression Partners, LP Long-Term Incentive Plan that will vest 60% on December 5, 2027 and 40% on December 5, 2029, generally contingent upon the reporting person's continued service on the board of USA Compression Partners, LP (the "Issuer") or one of its affiliates on each applicable vesting date.

Exercisable

Date

(D)

The Reporting Person is a director of USA Compression GP, LLC, the general partner (the "General Partner") of the Issuer. The Issuer is managed by the directors and executive officers of the General

/s/Christopher W. Porter, as 01/06/2025 attorney-in-fact for Glenn E. **Joyce**

** Signature of Reporting Person Date

Shares

Title

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).

Code

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.