Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

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* <u>Liuzzi Matthew C</u>						2. Issuer Name and Ticker or Trading Symbol USA Compression Partners, LP [ USAC ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle) C/O USA COMPRESSION PARTNERS, LP 100 CONGRESS AVENUE, SUITE 450						3. Date of Earliest Transaction (Month/Day/Year) 03/10/2017										X Officer (give title below) Other (specific below)  See Remarks				
(Street) AUSTIN	I T	x	78701 (Zip)		4.1	If Ame	endme	ent, Date	of Origina	Original Filed (Month/Day/Year)					Individual or Joint/Group Filing (Check Appl Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
		Tak	ole I - No	n-Deri	vativ	e Se	curi	ties Ac	quired	Dis	posed c	of, or E	Bene	ficially	/ Owned					
				2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		A) or 3, 4 and		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A)	or	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Common	ommon Units			03/10/2017					М		30,29	91 A		(1)(2)	63,627(3)			D		
Common Units				03/10/2017		7			М		9,844	4 .	A	(1)(2)	73,4	471 <sup>(3)</sup>		D		
Common Units				03/10/2017		.7			М		3,571	,571 A		(1)(2)	77,042(3)			D		
Common Units				03/1	03/10/2017				D		15,14	15,146 Γ		\$18.13	3 61,896 <sup>(3)</sup>			D		
Common Units				03/1	10/2017				D		4,922	2	D	\$18.13	3 56,974 <sup>(3)</sup>			D		
Common Units					03/10/2017				D		1,786	5	D	\$18.13	3 55,188 <sup>(3)</sup>			D		
		-	Table II -								osed of,				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Transaction Code (Instr 8)		5. Nof Deri Sec Acq (A) Dispose of (I	lumber ivative curities juired		xerci:	sable and e	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		mount	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	Own Form Direct or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or No of	umber						
Phantom Units	(1)(2)	03/10/2017			M			30,291	03/10/20	17	03/10/2017	Comm		0,291	(1)(2)	0		D		
Phantom Units	(1)(2)	03/10/2017			M			9,844	03/10/20	17	03/10/2017	Comm		),844	(1)(2)	0		D		
Phantom	(1)(2)	03/10/2017			M			3,571	03/10/20	17	03/10/2017	Comm	on 3	3,571	(1)(2)	0	$\neg$	D		

## **Explanation of Responses:**

- 1. Each phantom unit was the economic equivalent of one common unit of USA Compression Partners, LP.
- 2. The Reporting Person settled approximately 50% of his newly vested phantom units for cash and the rest for common units.
- 3. Includes common units acquired under the USA Compression Partners, LP Distribution Reinvestment Plan.

The Reporting Person is the Vice President, Chief Financial Officer and Treasurer 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/ Matthew C. Liuzzi 03/14/2017

\*\* Signature of Reporting Person

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.