FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| lashington, | D.C. | 20549 | |
|-------------|------|-------|--|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB API | PROVAL | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average burden | | | | | | | |
| hours per respons | e 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* Somasundaram Sivasankaran | | | | | 2. Issuer Name and Ticker or Trading Symbol ChampionX Corp [CHX] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
|--|---|--|---|---|--|-------------------|--|--|---|---------|---|---|---|---|---|---|--|---|--|--|
| (Last) (First) (Middle) C/O CHAMPIONX CORP, 2445 TECHNOLOGY | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/15/2024 | | | | | | | | \dashv | X Director 10% Owner X Officer (give title below) Other (specify below) President & CEO | | | | | | | |
| FOREST BLVD., BLDG 4, 12TH FLOOR | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| (Street) THE WOODI | LANDS TX | 7 | 77381 | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | | | | | |
| | | Table | I - N | on-Deriva | tive S | Secui | rities | Ac | quire | d, Di | sposed of | , or B | enefici | ally Own | ed | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y | | | rear) | Execution Date, | | | | | Acquired (A) or (D) (Instr. 3, 4 and | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | | (111301.4) | | |
| Common Stock 02/15/20 | | | | 24 | | | Α | | 87,646 | A | \$0 | 631, | 631,229 | |) | | | | | |
| Common Stock 02/16/20 | | | 24 | | | F | | 10,261 | D | \$30.25 | 620,968 | | D | | | | | | | |
| Common Stock | | | | | | | | | | | | | 99,0 |)11 | : | I | By Limited Partnership | | | |
| 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) | Exec if any | | | action (Instr. | 5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5 | rative rities ired r osed) | Expiration (Month/Day | | (Year) | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares | | 8. Price of Derivative Security (Instr. 5) | ative derivative | | 10. Owners Form: Direct (I or Indire (I) (Instr | Beneficial Ownership ect (Instr. 4) | | |

Explanation of Responses:

Remarks:

/s/ Julia Wright, as attorneyin-fact

02/20/2024

** Signature of Reporting Person Date

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

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.

^{*} 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).