FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden 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).

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 10b5-1(c). See Instruction 10.

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>Lehner Keefer McGovern</u>					2. Issuer Name and Ticker or Trading Symbol KLX Energy Services Holdings, Inc. [KLXE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify				Owner	
(Last) (First) (Middle) 3040 POST OAK BOULEVARD, 15TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 12/30/2024								Officer (give title Other (specify below) See Remarks						
(Street) HOUSTON TX 77056 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi	<u>,</u>					
1. Title of S	Security (Ins		I - Noi	2. Transac		2A. [Deeme		3.		4. Securitie	s Acqu	ired (A) or	5. Amo	ount of	6. Ownership	7. Nature
Date (Month/Day					y/Year)	/Year) Execution Date, if any (Month/Day/Year)			Transaction Code (Instr. 8)		Of (D) (Instr. 3, 4		4 and	nd Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount	(A) ((D)	or Pr	ice	Transaction(s) (Instr. 3 and 4)			(moa: 4)		
Common stock 12/30/2						ve Securities Acqui			irod [lien	1,000	or Bo	<u> </u>	5.02 ⁽²⁾		9,988	D	
				(e.g., pu	its, ca		warra	ants,	optio	ns, c	onvertib	le se	curit	ies)				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, /Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	er				

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 26, 2024 for tax and estate planning purposes.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions on one day at prices ranging from \$5.00 to \$5.05. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote

Remarks:

Executive Vice President and Chief Financial Officer

/s/ Max L. Bouthillette, 01/02/2025 attorney-in-fact

** 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.