| SEC For | | | | | | | | | | | | | | | | | | | | |
|---|---|--|---|-------|--|---|--|--|--|--|------------------|---|---|------------------------|---|--|---|--|---|--|
| | | | | | TATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | | | | OMB APPROVAL OMB Number: 3235-0287 | | | |
| Section obligat | ed pur | d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | | Estimated average burden hours per response: 0.5 | | | | | | | |
| 1. Name and Address of Reporting Person [*] Willems Tim | | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>NCS Multistage Holdings, Inc.</u> [NCSM] 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | 5. Relationship of Repo (Check all applicable) Director X Officer (give tit below) | | | son(s) to Iss 10% O Other (s below) | wner | |
| (Last) C/O NCS | ast) (First) (Middle) O NCS MULTISTAGE HOLDINGS, INC. | | | | | 03/07/2024 | | | | | | | | | | ief Opera | ations | , | | |
| 19350 STATE HIGHWAY 249, SUITE 600 | | | | | - 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person | | | | | |
| (Street) HOUSTON TX 77070 | | | | | | Forr | | | | | | | | | | rm filed by More than One Reporting rrson | | | | |
| (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. | | | | | | | | | | | | | | |
| | | | le I - Nor | | | | | | quired, D |)isp | | | | | - | | | | | |
| 1. Title of Security (Instr. 3) Date (Month/L | | | | | if any | ecution Date, | | Transaction Dispose Code (Instr. 5) | | ities Acquired (A) or d Of (D) (Instr. 3, 4 and | | | 5. Amour Securitie Beneficia Owned F Reported | s ally following | 6. Owners Form: Dir (D) or Ind (I) (Instr. 4 | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | / | Amount | (A) or (D) PI | | rice | Transaction(s) (Instr. 3 and 4) | | | | (| |
| | | 1 | | | | | | | uired, Dis , options | | | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exer Expiration I (Month/Day | Date | | 7. Title and A of Securities Underlying Derivative Se (Instr. 3 and 4 | | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s Ily J | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership t (Instr. 4) | |
| | | | | Cod | Code | v | (A) | (D) | Date Exercisable | | xpiration ate | Title | Amo or Num of Shar | nber | ber | | | | | |
| Equivalent Stock Units | (1) | 03/07/2024 | | | Α | | 11,858 | | (2) | | (2) | Common Stock | 11,8 | 858 | \$ 0 | 16,29 | 6 | D | | |

Explanation of Responses:

1. These equivalent stock units settle in cash and represent the economic equivalent of one share of common stock, provided that the amount of cash settled for any equivalent stock unit will not exceed the maximum payout established by the Compensation, Nominating and Governance Committee.

2. Include 759 equivalent stock units which vest on February 28, 2025, 3,679 equivalent stock units which vest in two equal annual installments beginning on February 28, 2025 and 11,858 equivalent stock units which vest in three equal annual installments beginning on February 28, 2025.

/s/ Ori Lev, attorney-in-fact 03/08/2024

** 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.