FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burd	den								
1	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). 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*  Hoyt Rebecca A						2. Issuer Name and Ticker or Trading Symbol APA Corp [ APA ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner					
(Last) 2000 PO	(F ST OAK B	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/25/2024							X	below)	Officer (give title below)  Sr. VP, Chie		Other (s below) t Officer	specify	
SUITE 100					4. 1	If Am	endment,	Date of	Original	Filed	(Month/Day/	Line)	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	ON T	X	77056										)	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	itate)	(Zip)		R	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a cor the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Та	ble I - No	n-Deriv	/ativ	re S	ecuritie	es Acq	uired,	Dis	posed of	, or Ben	eficially	Owned					
Date				saction /Day/Year)		Execution Date,					. Securities Acquired (A) o isposed Of (D) (Instr. 3, 4		and 5) Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transacti	Reported Transaction(s) (Instr. 3 and 4)		1	Instr. 4)	
Common Stock 01/2					5/202	/2024			<b>M</b> <sup>(1)</sup>		31,046	A	\$0	125,	837	37 D			
Common	Stock			01/25	5/202	24			D <sup>(2)</sup>		31,046	D	\$35.88 94,791				D		
Common Stock													13,820.131			I	Held by Trustee of 401(k) Plan		
			Table II -						,	•	osed of, convertib		•	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 Da if any (Month/Day/N	ate, Tra	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	ion Da			es g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	Owner Form: Direct or Indi (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	ode	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares		Transaction (Instr. 4)	ion(s)			
Restricted Stock / Units <sup>(3)</sup>	\$0 <sup>(2)</sup>	01/25/2024			A		62,091		(4)		(4)	Common Stock	62,091	\$0 99,		254 D			
Restricted Stock /	\$0 <sup>(2)</sup>	01/25/2024		1	М			31,046	(1)		(1)	Common Stock	31,046	\$0	68,20	)8	D		

## **Explanation of Responses:**

- 1. RSU vesting under 2021 Performance Program under 2016 Omnibus Equity Compensation Plan to be settled in cash only.
- 2. Each restricted stock unit is the economic equivalent of one share of the Issuer's common stock and can only be settled in cash.
- 3. With tandem tax withholding right.
- 4. 2021 Performance Program under 2016 Omnibus Equity Compensation Plan with performance period ended 12/31/2023. Final number of RSUs determined on 1/25/2024.

## Remarks:

Raj Sharma, Attorney-in-Fact 01/26/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.