FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

ashington,	D.C.	20549		
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STATEMENT	OF	<b>CHANGES</b>	IN BE	ENEFICIA	L OWN	ERSHIP
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OMB APPROVAL								
OMB Number: 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*  Karros Eric P.					STI	2. Issuer Name and Ticker or Trading Symbol STEEL PARTNERS HOLDINGS L.P. [ SPLP ]							(Chec	Relationship of Reporti (Check all applicable)     X    Director     Officer (give title		ng Per	10% Ov	wner		
(Last)	(Fii	st) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024									below			Other (s below)	specify		
590 MAI	DISON AV	ENUE, 32ND FI	LOOR		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) NEW Y	ORK N	7 1	0022												X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	<u>Z</u> ip)		Rule 10b5-1(c) Transaction Indication											nded to				
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.													nded to							
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date		Date,	Transaction Disposed (Code (Instr. 5)		es Acquired (A) or Of (D) (Instr. 3, 4 and		A) or 8, 4 and	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	or F	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Units no pa	ar value		04/01/	2024		A		589(1)	A	1	\$ <mark>0</mark>	:	589		D				
Common Units no par value															42	2,581		I	By Family Trust	
	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)	Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any			on Date,		Transaction Code (Instr. 8) Sect Acquire (A) C Disp of (E		osed )) r. 3, 4	6. Date Exerci Expiration Da (Month/Day/Yo		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Se (In	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amor or Numl of Share	ber						

## **Explanation of Responses:**

1. Restricted Common Units granted to the Reporting Person under the Issuer's existing director compensation program under which each non-management director receives equity compensation in the form of Restricted Common Units in four separate quarterly installments. These Restricted Common Units vested immediately.

> By: /s/ Maria Reda as attorney-in-fact for Eric P.

04/03/2024

**Karros** 

\*\* Signature of Reporting Person

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.