| SEC Form 4 |
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Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| | OMB Number: | 3235-0287 | | | | | | |
|--------------------------|---------------------|-----------|--|--|--|--|--|--|
| Estimated average burden | | | | | | | | |
| l | hours per response: | 0.5 | | | | | | |

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

| | | | of Section 50(n) of the investment Company Act of 1940 | | | | | | | |
|----------------------------------|-------------------------|-------------------|---|------------|---|---------------|------------|--|--|--|
| 1. Name and A Young Do | ddress of Reporting F | Person* | 2. Issuer Name and Ticker or Trading Symbol <u>NEWPARK RESOURCES INC</u> [NR] | (Checl | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| <u>100115 D0</u> | <u>india () ini</u> | | | X | Director | 10% C | Dwner | | | |
| P | | | — | | Officer (give title | Other | (specify | | | |
| (Last) 9320 LAKE SUITE 100 | (First) SIDE BOULEVA | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 05/19/2022 | | below) | below |) | | | |
| | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | vidual or Joint/Group | Filing (Check | Applicable | | | |
| (Street) THE WOODLAN | • | | | Line) X | Form filed by One Form filed by More Person | | | | | |
| (City) | (State) | (Zip) | | | | | | | | |
| | | Table I - Non-Der | ivative Securities Acquired, Disposed of, or Ben | eficially | / Owned | | | | | |
| i | | 1 | | | | | 1 | | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | Securities Beneficially | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------|---|---|---------------|-------|------------------------------------|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Common Stock | 05/19/2022 | | Α | | 36,496 ⁽¹⁾ | Α | \$0.0 | 124,198 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | (c.g., puis, cuis, warants, options, convertible securities) | | | | | | | | | | | | | | |
|---|--|--|---|-----------------------------------|---|-----|-----|---------------------|--------------------|---|--|---|--|--|--|
| 1. Title Deriva Securi (Instr. 3 | ive Conversion y or Exercise | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Date, Transaction Code (Instr. | | of | | Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. The shares will vest on the earlier of the first anniversary of the date of grant or the day prior to the next annual stockholders meeting.

| By: E. Chipman Earle For: Donald Young | 05/20/2022 |
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| ** 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.