| SEC Form 4 | |
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| FORM | 4 |

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). |
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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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPRO | JVAL |
|------------------------|-----------|
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| intended to satis defense conditio 1(c). See Instruc | ns of Rule 10b5- | | | | | | |
|---|------------------|-------|--|-------------------|---|---------------------------------------|--|
| 1. Name and Address of Reporting Person* Lacy Christopher W (Last) (First) (Middle) | | | 2. Issuer Name and Ticker or Trading Symbol EXPAND ENERGY Corp [EXE] 3. Date of Earliest Transaction (Month/Day/Year) 10/15/2024 | | tionship of Reporting Per- c all applicable) Director Officer (give title below) EVP - GENERAL (| 10% Owner Other (specify below) | |
| 6100 N. WESTERN AVENUE | | | 10/15/2024 | | | | |
| (Street) OKLAHOMA CITY | ОК | 73118 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | vidual or Joint/Group Filing Form filed by One Repor Form filed by More than Person | orting Person | |
| (City) | (State) | (Zip) | | | Person | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Disposed Of 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------------------------------|--|------------------------------------|---------------|-------------------|---|---|---|
| | | | Code V | | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (mou: 4) |
| Common Stock | 10/15/2024 | | A | | 12,578 | Α | \$ <mark>0</mark> | 61,121 | D | |

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

| | | (e.g., pi | 115, 66 | ans, v | varie | ants, | options, t | Jonvenub | ie se | cunities | 9 | | | |
|---|--|---|------------------------------|--------|--|----------|---------------------|--|-------|---|---|--|--|--|
| 1. Title o Derivativ Security (Instr. 3) | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) o Dispo of (D (Instr | of Expir | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | . Title and 8. Price of Mamount of Becurities Security Underlying Underlying cecurity (Instr. 5) Becurity (Instr. 5) and 4) | | 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:

Remarks:

Michael D. May For: CHRISTOPHER W. LACY

10/16/2024

** 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.