FORM 4

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

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Estimated average burden hours per response:

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* <u>LEYKUM ELIZABETH</u>						2. Issuer Name and Ticker or Trading Symbol IES Holdings, Inc. [ IESC ]									Relationshipheck all app	licable)	ng Pei	rson(s) to Is 10% Ov	
(Last)	(Fir	st) (N		3. Date of Earliest Transaction (Month/Day/Year) 07/01/2024								Office below	er (give title v)		Other (s below)	pecify			
2 RIVERWAY, SUITE 1730						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Lir	ndividual or Joint/Group Filing (Check Applicable				oplicable
(Street)															Form filed by One Reporting Pers				
HOUST	ON TX	7											Form filed by More than One Reporting Person						
(City) (State) (Zip)					Rul	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.																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Exe if an	Deemed cution Date, y nth/Day/Year)		Transaction		4. Securities Acquired ( Disposed Of (D) (Instr. 3 5)		I (A) or . 3, 4 a	nd Securi Benefi Owned	ties cially I Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A (D	) or ))	Price	Transa	ported nsaction(s) str. 3 and 4)			Instr. 4)		
Common Stock <sup>(1)</sup> 07/01/2						2024					183		A	\$0	) 4	4,896		D	
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I				of		6. Date Exercis Expiration Date (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		f g nstr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y C F O (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nur of	ount mber ares					

## **Explanation of Responses:**

1. Represents Phantom Stock Units ("PSUs") granted pursuant to the IES Holdings, Inc. ("IES") 2006 Equity Incentive Plan, as amended and restated (the "2006 Equity Incentive Plan") upon Ms. Leykum electing to receive PSUs in lieu of cash or common stock for that portion of her retainer. Each unit converts to one share of IES common stock when either (i) Ms. Leykum leaves the board of directors for any reason, or (ii) upon a change of control as defined in the 2006 Equity Incentive Plan.

## Remarks:

Mary K. Newman, Attorney-

07/02/2024

OMB APPROVAL

3235-0287

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in-Fact

\*\* 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.