## FORM 5

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**

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL
OWNERSHIP

OMB APPRO	OVAL							
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							
	OMB Number: Estimated average bure							

Form 3 Holdings Reported.

Instruction 1(b)

Form 4 Transa	sactions Re	eported.	File	ed pursuant to or Sectior					ities Exchai ompany Act								
1. Name and Address of Reporting Person* <u>Turner Walter W</u>				2. Issuer Name <b>and</b> Ticker or Trading Symbol Koppers Holdings Inc. [ KOP ]							Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner						
(Last) (First) (Middle) 436 SEVENTH AVENUE				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2006					Year)	X Officer (give title Other (specify below)  President and CEO							
(Street) PITTSBURGI (City)	H PA		5219 Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea				2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Dispose	Securiti Benefic		es			7. Nature of Indirect Beneficial Ownership
								Amou	nt	A) or D) Price			Issuer's Fiscal Year (Instr. 3 and 4)			ect (I)	(Instr. 4)
Common Stock			11/02/2006		G		3	1,	000	D \$0		379		9,215		D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
Security or Ex (Instr. 3) Price Deriv	nversion Exercise ce of rivative curity	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) or Dispo	or posed D) tr. 3, 4			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares		nt er		9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	i lly	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	

**Explanation of Responses:** 

/s/ Steven R. Lacy, Attorney-

in-Fact

\*\* Signature of Reporting Person Date

02/14/2007

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.