FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingto

n,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* Feng Xudong					2. Issuer Name and Ticker or Trading Symbol Koppers Holdings Inc. [KOP]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
													X Dire	tor		10% Ow	ner	
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 09/11/2023								Offic belo	er (give title v)		Other (s below)	pecify		
436 SEVENTH AVENUE				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)					
(Ctup at)														X Forn	filed by One	e Repo	orting Persor	1
(Street) PITTSBU	URGH 1	PA	15219											Forn Pers		re thar	n One Repor	ting
(City) (State) (Zip)					Rı	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.												
		Tab	le I - Noi	า-Deriv	ative	Sec	uritie	s Ac	quired, [Disp	osed o	of, or Be	neficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution Da			Code (Ir	Transaction Dispose Code (Instr. 5)		rities Acquired (A) or ed Of (D) (Instr. 3, 4 a		d Secur Benef Owne	cially I Following	Form (D) o	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o (D)	r Price		ed ction(s) 3 and 4)		(Instr. 4)
		Т							uired, Di , options					y Owne	1			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	Code (In:				6. Date Exe Expiration I (Month/Day	Date		Amount of		8. Price of Derivativy Security (Instr. 5)		e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indirec Beneficia Ownersh (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		cpiration ate	Title	Amount or Number of Shares					
Dividend Equivalent Rights	(1)	09/11/2023			A		9.829		(2)		(2)	Common Stock	9.829	\$0.00	64.81	4	D	

Explanation of Responses:

- 1. The dividend equivalent rights ("DERs") accrued with respect to additional time-based restricted stock units ("RSUs") credited to the reporting person with respect to deferred compensation. Each DER is the economic equivalent of one share of Koppers Holdings Inc. common stock.
- 2. Once released, the RSUs corresponding to these DERs will become payable according to the election of payment designation that was filed by the reporting person subject to the Koppers Holdings Inc. Director Deferred Compensation Plan (the "Plan"). Such payment will be either lump sum or in annual installments commencing on the May 31st next following the reporting person's separation from service (as defined under the Plan) or, if later, and elected by the reporting person at the time he/she first elects to defer any payment under the Plan, May 31st of the year specified by the reporting person.

Remarks:

/s/Stephanie L. Apostolou, **Attorney in Fact**

09/13/2023

** 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.