FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| Check this box if no longer subject | |
|-------------------------------------|--|
| to Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden 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

| 1. Name and Address of Reporting Person* WILKERSON SONJA MICHELLE | | | | | | 2. Issuer Name and Ticker or Trading Symbol Koppers Holdings Inc. [KOP] | | | | | | | | | k all app | tionship of Reporti all applicable) Director | | erson(s) to Is | |
|---|---|--|---------------------------------|------------------------------|---------------|---|--------|---|--|-------|-------------------|---|---|-----------------------------|---|--|---|--|--|
| (Last) 436 SEV | (Last) (First) (Middle) 436 SEVENTH AVENUE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/06/2020 | | | | | | | | | Office belov | cer (give title ow) | | Other (below) | specify |
| (Street) PITTSBI | URGH PA | ate) (Z | 5219 Zip) | a Doriva | | Line) X Form fi | | | | | | | | | | | | | |
| | | Table | I - Nor | n-Deriva | tive s | secu | rities | Acq | uirea, | DIS | posea of | , or E | 3ene | ricially | / Own | ea | | | |
| Date | | | 2. Transac Date (Month/Da | | Exec if an | A. Deemed xecution Date, any Month/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securitie Disposed 0 5) | | | | | 5. Amo Securit Benefic Owned Report | ties cially Following | Forn (D) c | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Transa (Instr. 3 | tion(s) | | | |
| Common Stock ⁽¹⁾ | | | 05/06/ | /2020 | | | | A | | 8,434 | A | A 9 | \$0.00 | 00 14,138 | | | D | | |
| | | Tal | | | | | | | | | osed of, onvertib | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | med on Date, Day/Year) | Code (I | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) Amoun or Numbe of Title Shares | | De Se (In | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. The reporting person was awarded time-based restricted stock units.

Remarks:

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

05/07/2020

** 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.