FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	D C	20E40	
Washington,	D.C.	20549	

STATEMENT	OF CHANGE	S IN BENEFICIA	AL 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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Washington Kevin						2. Issuer Name and Ticker or Trading Symbol Koppers Holdings Inc. [KOP]								heck all ap	ctor	ng Pe	10% Ov	vner			
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/12/2023								X Officer (give title below) Other (spe below) VP, External Affairs							
430 SE V	SEVENTH AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable							
(Street)	URGH P.	A :	15219												Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	state)	(Zip)		Rul	Rule 10b5-1(c) Transaction Indication						n L									
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										ded to											
		Table	e I - No	n-Deriv	ative \$	Sec	uriti	es Ac	quired,	Dis	posed	of, or B	eneficia	ally Own	ed						
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,			Code (I	Transaction Disposed O Code (Instr. 5)				Secui Benet Owne	ties Fo cially (D) Following (I)		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	ınt (A) or (D)			orted saction(s) r. 3 and 4)			(Instr. 4)				
Common	Stock			06/13/	2023	023		М		12(1	(1) A \$		0(1)	7,376		D					
Common Stock 06/13/2					2023	.023		F		815	15 D ⁽²⁾ \$		63 6,561			D					
		Ta	able II -									f, or Be ible sec		ly Owne	d						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/i		4. Transac Code (li 8)	action Number Expirati			6. Date Expiration Expiration (Month/Da				of s ng e Security	8. Price of Derivative Security (Instr. 5)		s lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		expiration Date	Title	Amount or Number of Shares								
Dividend Equivalent Rights	(3)	06/12/2023			A		6		(3)		(3)	Common Stock	6	\$0.00	24		D				
Dividend Equivalent Rights	(4)	06/13/2023			M			12 ⁽⁴⁾	(4)		(4)	Common Stock	12	\$0.00	12		D				

Explanation of Responses:

- 1. Represents shares acquired upon release of dividend equivalent rights ("DERs"), as reported in Table II, on a one-for-one basis.
- 2. Shares surrendered to the issuer by the reporting person as payment for the tax withholding related to the vesting of time-based restricted stock units ("RSUs").
- 3. The dividend equivalent rights ("DERs") accrued with respect to additional time-based restricted stock units credited to the reporting person with respect to RSUs granted on June 13, 2022. Each DER is the economic equivalent of one share of Koppers Holdings Inc. common stock.
- 4. These DERs were released in connection with the vesting of RSUs granted on June 13, 2022. Each DER is the economic equivalent of one share of Koppers Holdings Inc. common stock.

Remarks:

/s/Stephanie L. Apostolou, Attorney in Fact

06/14/2023

** 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.