FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)														
Name and Address of Reporting Person * Sichko William J. Jr.				2. Issuer Name and Ticker or Trading Symbol PQ Group Holdings Inc. [PQG]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O PQ GROUP HOLDINGS INC., 300 LINDENWOOD DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 01/18/2021							X Officer (give title below) Other (specify below) See Remarks					
(Street) MALVERN, PA 19355				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City		(State)	(Zip)		Т	able I	- Nor	-Der	ivative S	Securities	Acqu	ired, Dispe	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year		Date	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)			of (D)	Beneficially Owned Following Ownership of In Reported Transaction(s) Form:		7. Nature of Indirect Beneficial Ownership			
				(Iviolidi) Du			ode	V	Amoun	 	Price	`	ŕ		or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		01/18/2021				A		95,842	2 A	\$ 0	283,363			D	
Common Stock											585,042			I	By family trust (1)	
Reminder:	Report on a s	separate line fo	r each class of secur	Derivative S	Securi	ties Ac	equire	Pers cont the f	ons wh ained in orm dis	o respor this for splays a	m are curre eficial	e not requ ntly valid	OMB conf	formation spond unle trol numbe	ss	1474 (9-02)
1. Title of	2	3. Transaction	`	e.g., puts, c	ans, w	5.	ts, opi	i i	ate Exer			itle and	8 Price of	9. Number	of 10.	11. Natur
	Conversion or Exercise Price of Derivative Security	ersion Date ercise (Month/Day/Y of ative	Execution Da th/Day/Year) any	te, if Transaction Numl Code Year) (Instr. 8) Deriv Secur Acqu (A) o Dispe of (D (Instr. 4, and		vative rities ired rosed)	and Expiration Date (Month/Day/Year)		Ame Und Secu	ount of derlying urities tr. 3 and		Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivati Security Direct (1 or Indire	nip of Indire Beneficia Ownersh (Instr. 4)		
				Code	e V	(A)		Date Exer		Expiratior Date	Title	Amount or Number of Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Sichko William J. Jr. C/O PQ GROUP HOLDINGS INC. 300 LINDENWOOD DRIVE MALVERN, PA 19355			See Remarks				

Signatures

/s/ Joseph S. Koscinski, as attorney-in-fact for William J. Sichko Jr.	01/20/2021
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).

Represents shares of common stock held by a family trust. Mr. Sichko disclaims beneficial ownership of such securities except to the extent of his pecuniary interest therein, (1) and the filing of this report is not an admission that Mr. Sichko is the beneficial owner of such securities for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

Remarks:

Vice President, Chief Administrative Officer

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.