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)																	
1. Name and Address of Reporting Person * Crews Michael C.					2. Issuer Name and Ticker or Trading Symbol PQ Group Holdings Inc. [PQG]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner						
(Last) (First) (Middle) C/O PQ GROUP HOLDINGS INC., 300 LINDENWOOD DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 01/20/2021								X Officer (give title below) Other (specify below) See Remarks						
(Street) MALVERN, PA 19355				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						-	6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execu			(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership of Form:	of I Ber	Beneficial	
				(Mon	th/Day/Yea	ar)	Code	e V	7 1	Amount	(A) or (D)	Pri	ice	(Instr. 3 a	c		Direct (D or Indirec (I) (Instr. 4)	r Indirect (Instr	
Common Stock		01/20/2021				F		4	4,582	D	\$ 15.	495	319,394		D				
Common Stock												28,005			I	By (1)	trust		
Reminder:	Report on a s	separate line f	or each class of sec	urities l	beneficially	y ow	ned di	rectly	or i	indirectly	y								
								CC	onta	ained ir	n this	form	are	not requ	ction of inf uired to res OMB cont	spond unle	ess.	C 1474	4 (9-02)
			Table II		ative Secu									y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/	Year) Execution D	l Pate, if	(ear) 4. S. Number Code (Instr. 8) Derivat Securiti Acquire (A) or Dispose of (D) (Instr. 3 4, and 5		6. ar (1) tive ies ed ed ed 3,	. Da	ate Exerc Expirationth/Day/	cisable on Date	:	7. Tit Amo Unde Secur	Eitle and tount of Derivative Security (Instr. 5) Str. 3 and Str. 3 and Str. 4 8. Price of Derivative Security Security Security Owned Following Reporte Transac (Instr. 4		Securities Beneficiall	Ownership Form of Derivative Security: Direct (D) or Indirect	of tive ty: (D)	Beneficia e Ownershi (Instr. 4)	
					Code V	V	(A) (ate xer		Expira Date	tion	Title	Amount or Number of Shares					

Reporting Owners

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

Signatures

/s/ Joseph S. Koscinski, as attorney-in-fact for Michael C. Crews	01/22/2021
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 trust. Mr. Crews disclaims beneficial ownership of such securities except to the extent of his pecuniary interest therein, and the (1) filing of this report is not an admission that Mr. Crews 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:

Executive Vice President and Chief Financial 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.