FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | OMB APPROVAL | | | | | | | | | | | |
|---|--------------|---------|--|--|--|--|--|--|--|--|--|--|
| 1 | OMD Number | 2225.02 | | | | | | | | | | |

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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

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* PLATZER L WILBERT (Last) (First) (Middle) QUAKER CHEMICAL CORPORATION ONE QUAKER PARK, 901 E. HECTOR STREET | | | | | | UA) | KER of Earli | CHE | EM] | | ČC | ORP [k | | Director Officer below) | ationship of Reporting Person(s) to Issuer (all applicable) Director 10% Owner Officer (give title Other (specify below) below) VP & Managing Dtr - Europe | | | | | |
|--|---|--|---|---------------------------------------|------|---|-----------------|-------|----------------------------------|---|--|--------------------|--|-------------------------|---|--|---|-------------------------------------|--|---------------------------------------|
| (Street) CONSHOHOCKEN PA 19428-2380 (City) (State) (Zip) Table I - Non-Deriv | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | dividual or Joint/Group Filing (Check Applicable) Compared to the proof of the pr | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. Transaci Code (In 8) | tion | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | A) or | 5. Amou Securitie Benefici Owned I Reporte | nt of es ally Following d | Form (D) o | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | | Code | v | Amount | (A) (D) | or F | Price | Transac (Instr. 3 | | | | |
| Common | Stock | | | 12/21/2010 M 6,549 A \$19.45 30,363 D | | | | | | | D | | | | | | | | | |
| Common | Common Stock | | 12/21/2010 | | 0 | | | | S ⁽¹⁾ | | 6,549 |)] |) | \$44 | 23 | 23,814 | | D | | |
| | | T | able II - | | | | | | | | | sed of, onverti | | | | Owned | | | | |
| 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, Trans | | action Instr. | of | | Exp | 6. Date Exercisa Expiration Date (Month/Day/Yea | | | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4) | s s illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Dat Exe | te ercisable | | xpiration ate | Title | or Nu of | nount mber ares | | | | | |
| Employee Stock Option (right to | \$19.45 | 12/21/2010 | | | M | | | 6,549 | | (2) | 0 | 1/29/2015 | Commo Stock | n 6, | 549 | \$0.00 | 3,275 | | D | |

Explanation of Responses:

- 1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 sales plan adopted by the reporting person on August 11, 2010.
- $2.\ Options\ exercisable\ in\ three\ annual\ installments:\ 3,274\ shares\ on\ January\ 29,\ 2009;\ 3,275\ shares\ on\ January\ 29,\ 2010;\ and\ 3,275\ shares\ on\ January\ 29,\ 2011.$

<u>Irene M. Kisleiko, Attorney-in-</u> <u>Fact for L. Wilbert Platzer</u> <u>12/22/2010</u>

** 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.