FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington, D.C. 20549	
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STATEMENT	OF CHANGES	IN BENEFICIAL	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

1. Name and Address of Reporting Person* BERQUIST JOSEPH A				2. Issuer Name and Ticker or Trading Symbol QUAKER CHEMICAL CORP [KWR]								5. Relationship of Report (Check all applicable) Director				10% O	wner		
(Last) 901 E. H	(Fir	,	1iddle)		3. Date of Earliest Transaction (Month/Day/Year) 11/13/2023									X Officer (give title below) EVP, Chief Commercial Office					·
(Street) CONSHOHOCKEN PA 19428-2380				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (Z	iip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							n that is inte	nded to						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/				2A. Deemed Execution Date if any (Month/Day/Yea		Date,	3. Transaction Code (Instr.) 8)						nd 5) Secu Bene Own Follo		urities Feficially (led Feficially (n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Cod	de V	An		(A) or (D)	Price		Transa	Reported Transaction(s) Instr. 3 and 4)				
Common Stock 11/13/202			13/2023	3		S			1,534	D	\$163.97	3.9726(1)		12,280		D			
Common Stock													265 ⁽²⁾				By 401(k)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Conversion or Exercise Price of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year)			Date,	Transaction Code (Instr. 8)		5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 and 5)	tive ties ed	Expiration Date (Month/Day/Year) es d			Ame Sec Und Der Sec	itle and bunt of urities lerlying ivative urity (Instr. nd 4)	Deri Seci	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A) (Date Exercisa	able	Expiratio Date	n Title	Amount or Number of Shares						

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$163.79 to \$164.38, inclusive. The reporting person undertakes to provide to Quaker Chemical Corporation, d/b/a "Quaker Houghton", any security holder of Quaker Houghton, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (1) to this Form 4.
- $2.\ Information\ based\ on\ reporting\ person's\ Plan\ Statement\ as\ of\ September\ 30,\ 2023.$

Remarks:

Victoria K. Gehris, Attorneyin-Fact for Joseph A. Berquist

11/15/2023

** 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.