FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL									
	OMB Number:	3235-0287								
I	Estimated average burden									
١	hours per response:	0.5								

	Check this box if no longer subject
	to Section 16. Form 4 or Form 5
\Box	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		, .				inpuny Act c										
1. Name ar	2. Issuer Name and Ticker or Trading Symbol U.S. SILICA HOLDINGS, INC. [SLCA]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)											
<u> </u>	ar etter G	<u> </u>											$-$ 2	Oired	ctor		10% Ov	vner			
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/11/2023									Offic belov	er (give title w)		Other (s below)	specify		
C/O US	SILICA HO	Δ If Δr	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable									
24275 KATY FREEWAY SUITE 600						4. II Amendment, Date of Original Flied (Month/Day/Teal)									Line)						
2 12/010	III I I I I I I I I I I I I I I I I I											X Form filed by One Reporting Person									
(Street)	•														Form filed by More than One Reporting Person						
IXII I	17	,	77434		Duk	Rule 10b5-1(c) Transaction Indication															
,					Ruie	; T(-כענ	T(C)	Hall	Sac	tion mu	icai	lion								
(City)	(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		<u> </u>																			
		Table	I - No	n-Deriva	tive S	ecui	rities	Acc	uired,	Dis	posed of	, or	Ben	eficia	lly Ow	ned					
1. Title of 9	Security (Ins	ion i	2A. D	eemed	l	3.		4. Securitie	es Aco	auired	(A) or) or 5. Amount of			vnership	7. Nature					
Date (Month/Day/					/Year)	Execuif any	execution Date, any Month/Day/Year)		Transaction Code (Instr.		Disposed Of (D) (Instr. 3		3, 4 and	Secur Benef Owne	ecurities eneficially wned ollowing		n: Direct r ect (I)	of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A (D	A) or D)	Price		orted saction(s) c. 3 and 4)					
Common	2023				A		12,077(1)		Α	\$0.00	163,594			D							
		Tah	ـ اا ما	Derivativ	vo Soc	viit	ioc /	/can	ired D	ien	ocad of	or B	2 on o	ficiall	, Own		•		1		
		Tab	71C 11 -	(e.g., pu											y Ownie	zu –					
1. Title of	2	2 Transposion	24 D				1								. Price of	9. Number	of I	10	11. Nature		
1. ITIE OF Derivative Security (Instr. 3)	vative Conversion Date urity or Exercise (Month/Day/Year) Execution Date, if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercise Expiration Date (Month/Day/Yea		ite	7. Title an Amount of Securities Underlyin Derivative Security (Instr. 3 an		f S	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Ow For Oir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)			
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Title	or Nur of	ount nber ıres							

Explanation of Responses:

1. Restricted Stock Units granted on May 11, 2023 and vesting on May 11, 2024.

Remarks:

/s/ Stacy Russell, as attorney- 05/15/2023 in-fact

** Signature of Reporting Person

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.