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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	STA

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* KOEPPEL HOLLY K						2. Issuer Name and Ticker or Trading Symbol ARCH RESOURCES, INC. [ARCH]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
													X Direct			10% Ov				
(Last) (First) (Middle) ONE CITYPLACE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 12/15/2022								Office below	r (give title)		Other (: below)	specify			
SUITE 300					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street) ST. LOUIS MO 63141					,									Form	,					
(City)	(S	tate)	(Zip)																	
		Tab	le I - Noi	n-Deriv	ative S	ecurities Ac	quire	d, D	isp	osed o	of, o	or Ben	eficia	lly Owne	d					
1. Title of Security (Instr. 3) Date (Month/D							Transaction Disposed Code (Instr. 5)			curities Acquired (A sed Of (D) (Instr. 3,			d Securiti Benefic Owned	neficially ned Following		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
							Co	le V	,	Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
		Т				curities Acq Is, warrants								/ Owned						
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution Date, T curity or Exercise (Month/Day/Year) if any C			Transaction of Ex			Expiration Date A (Month/Day/Year) S			7. Title and Amount of Securities Underlying Derivative Securi		ecurity	8. Price of 9. Nu Derivative deriv Security Secu (Instr. 5) Bene Owne		s Ily	10. Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Acquired (A) or Disposed of (D) (Instr. 3, 4 or Indirect (I) (Instr. 4) Owned Following (Instr. 3 and 4) Security Reported Transaction(s) (Instr. 4) and 5) Amount Number Date Expiration of Code ν (A) (D) Exercisable Date Title Shares Dividend Class A (1)(2)12/15/2022 (3) (3) 116 255 D Equivalent 116 \$0.00 A Commor Rights Stock Deferred Class A (2)(4)12/15/2022 599 (5) (5) 599 \$0.00 1,317 D Stock Units Common A Stock

Explanation of Responses:

1. Each dividend equivalent right is the economic equivalent of one share of Class A Common Stock of Arch Resources, Inc. (the "Issuer")

2. The reporting person has elected to reinvest dividend equivalents paid on outstanding restricted stock units ("RSUs") into additional RSUs.

3. The dividend equivalent rights accrued on restricted stock units held by the reporting person and will vest proportionately with the restricted stock units to which they relate. Vested shares are scheduled to be delivered to the reporting person on the earlier of the third month anniversary of the date of the reporting person's separation of service from the Board or the date of the occurrence of a Change of Control.

4. Each deferred stock unit represents the right to receive one share of Class A Common Stock of the Issuer.

5. The deferred stock units are fully vested and will be delivered to the reporting person on the earlier of the third month anniversary of the date of the reporting person's separation of service from the Board or the date of the occurrence of a Change of Control.

Remarks:

/s/ Rosemary L. Klein,	
Attorney-in-Fact	
** Signature of Reporting Person	

12/15/2022

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.