

CELANESE CORP Reported by NIVICA GJON N JR

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 10/04/11 for the Period Ending 10/01/11

Address 222 W. LAS COLINAS BLVD., SUITE 900N

IRVING, TX, 75039-5421

Telephone 972-443-4000

CIK 0001306830

Symbol CE

SIC Code 2820 - Plastic Material, Synthetic Resin/Rubber, Cellulos (No Glass)

Industry Commodity Chemicals

Sector Basic Materials

Fiscal Year 12/31





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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

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

1. Name and Address of Reporting Person *					2.]	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Nivica Gjon N Jr					C	Celanese CORP [CE]									,			
(Last) (First) (Middle)				3.]	3. Date of Earliest Transaction (MM/DD/YYYY)							-	Director10% Owner X Officer (give title below) Other (specify below)					
C/O CELANESE					10/1/2011							S	SVP, General Counsel and Sec.					
CORPORAT FREEWAY			√RJ															
(Street)					4.]	4. If Amendment, Date Original Filed (MM/DD/YYYY)							YY) 6	6. Individual or Joint/Group Filing (Check Applicable Line)				
DALLAS, TX 75234 (City) (State) (Zip)												_ X _ Form filed by One Reporting Person _ Form filed by More than One Reporting Person						
	, (88			I - N	on-Dei	ivati	ive Secu	ırities Ac	quir	ed, Di	sposed o	of, or	Benef	ficially Own	ed			
1. Title of Security (Instr. 3) 2. Trans. D				2A. Deeme Execution Date, if an		(Instr. 8)		or Disp	osed of (D) 3, 4 and 5)	osed of (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. 7. Nature of Indirect Beneficial				
								Code	V	Amour	(A) or (D)	Pric	ce					Ownership (Instr. 4)
Series A Common Stock 10/1/2011				2011			F		1314 (1)	D	\$33.7	75	51807			D		
	Tab	le II - Dei	ivative	Secu	rities l	Bene	ficially	Owned (e.g.	, puts	, calls, w	arrai	nts, op	otions, conve	rtible sec	eurities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	Date Exe	3A. Dec Executi Date, if	ition (Insti		Acq Disj		umber of vative Securities uired (A) or osed of (D) r. 3, 4 and 5)		6. Date Exercisable and Expiration Date				nderlying ecurity	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security				Code	V	(A)	(D)	Date	e rcisable	Expiration Date	Title	Amour	nt or Number of		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

(1) Shares withheld for the payment of taxes on the vesting of restricted stock units granted to the reporting person on October 1, 2009 and October 1, 2010.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Nivica Gjon N Jr C/O CELANESE CORPORATION 1601 W. LBJ FREEWAY DALLAS, TX 75234			SVP, General Counsel and Sec.					

Signatures

/s/ James R. Peacock III, Attorney-in-Fact for Gjon N. Nivica, Jr.	10/4/2011
*** 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 control number.