### FORM 4

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

☐ 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.

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

## 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. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Brown Willi	am M			Ce	elan	iese Co	orp [	CE	]								
(Last	(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							Officer (give title below) Other (specify below)					
C/O CELAN							1	0/1	9/2(	023							
W LAS COI			ITE 900	N													
	(Str	reet)		4. ]	If Ar	mendmei	nt, Da	te Oı	rigina	al File	ed (MM/DI	D/YYYY)	6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)
IRVING, T	X 75039												X Form filed by			Person	
(City) (State) (Zip)												Torin fried by	Form filed by More than One Reporting Person				
									<u> </u>		•		neficially Owne				
1.Title of Security (Instr. 3)			rans. Date				3. Trans. Code (Instr. 8)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) Instr. 3 and 4)			Ownership Form: Benefici Direct (D) Ownersh	Beneficial Ownership		
							Cod	le	V	Amou	(A) or	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
	Tal	ble II - Der	ivative Sec	urities	Ben	eficially	Own	ed ( <i>e</i>	2.g., ]	puts,	calls, wa	rrants,	options, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)	Derivativ		e Securities (A) or of (D)		6. Date Exercisable and Expiration Date				ng Derivative	9. Number of derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security			Code	V	(A)		(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Phantom Stock	(1)	10/19/2023		A		85.7	26 (2)		9	<u>(3)</u>	<u>(3)</u>	Commo Stock	n 85.726	\$116.65	12,787.813	D	

#### **Explanation of Responses:**

- (1) Each share of phantom stock represents the right to receive one share of Common Stock or the cash value of one share of Common Stock.
- (2) The reported phantom stock represents the person's quarterly cash retainer for service as a director which has been deferred under the Company's 2008 Deferred Compensation Plan (the "Plan").
- (3) As provided in the Plan, the reporting person may transfer a portion of the phantom stock account into an alternative investment account at any time, and on the earlier of the date previously elected by the reporting person to receive a payment or the termination of the reporting person's service as a director of the Company, the shares of phantom stock become payable in either cash or shares of Common Stock.

**Reporting Owners** 

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Brown William M C/O CELANESE CORPORATION 222 W LAS COLINAS BLVD, SUITE 900N IRVING, TX 75039	X						

#### **Signatures**

\*\*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.