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.

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. I	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
IHLENFEL	D JAY V			Ce	elan	ese Co	rp [CI	Ε]				X Director	, ,	100	% Owner	
(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)						Officer (give title below) Other (specify below)					
C/O CELAN							3/5	5/202	24							
W. LAS COLINAS BLVD., SUITE 900N (Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)						6. Individual or Joint/Group Filing (Check Applicable Line)					
IRVING, TX 75039-5421												X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(0	City) (St	ate) (Zip		Non-Der	ivat	ive Secu	rities Ac	quire	d, Di	sposed o	of, or Ber	neficially Owne	ed			
1. Title of Security (Instr. 3) 2. Trans. I						3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)) F	6. Amount of Securiti Following Reported 7 Instr. 3 and 4)			Ownership Form: H Direct (D)	Beneficial Ownership	
							Code	V	Amou	(A) or (D)	r Price				or Indirect (I) (Instr. 4)	(Instr. 4)
	Tal	ole II - Der	ivative Sec	curities 1	Bene	eficially	Owned (e.g., p	outs,	calls, wa	ırrants, (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				8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following	10. Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	V	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect	
Phantom Stock	(1)	3/5/2024		A		46.0)23	(2	2).	(2)	Common Stock	46.023	\$151.61	10,013.867	D	

Explanation of Responses:

- (1) Each share of phantom stock represents the right to receive one share of Common Stock.
- (2) The reported phantom stock represents dividend equivalents on compensation deferred under the Company's 2008 Deferred Compensation Plan (the "Plan"). The shares of phantom stock become payable in shares of Common Stock, as provided in the Plan, following the termination of the reporting person's service as a director of the Company.

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Relationships						
reporting 6 wher runne / ruaress	Director	10% Owner	Officer	Other			
IHLENFELD JAY V							
C/O CELANESE CORPORATION	X						
222 W. LAS COLINAS BLVD., SUITE 900N	Λ						
IRVING, TX 75039-5421							

Signatures

/s/ Adam R. Santosuosso, Attorney-in-Fact for Jay V. Ihlenfeld

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.