

CELANESE CORP Reported by RICHARDSON SCOTT A

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 08/04/20 for the Period Ending 07/31/20

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. Issuer Name and Ticker or Trading Symbol							ool		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Richardson	Scott A				Ce	lan	ese Co	orp [CF										
(Last)) (First	(First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							Director					
													EVP & CFO	X_ Officer (give title below) Other (specify below)				
C/O CELANESE CORPORATION, 222					7/31/2020								EVI & Cro					
W LAS COI			UITE	900N	_													
	(Stre	eet)			4. I	f An	nendme	nt, Date O	rigir	nal Fil	led (MM/E	D/YY	ΥY	() 6. Individual	or Joint/G	roup Filing	(Check App	icable Line)
IRVING, TX 75039														X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(0	City) (Sta	ite) (Zi	ip)						Form thed by More than One Reporting					one Reporting I	CISOII			
			Table 1	I - Non-	-Der	ivati	ive Secı	ırities Ac	quir	ed, D	isposed (of, or	·B	eneficially Own	ed			
1.Title of Security (Instr. 3)			2. Trans. Dat		2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	de	4. Securities Acquor Disposed of (E) (Instr. 3, 4 and 5))	(A)	5. Amount of Securit Following Reported (Instr. 3 and 4)	es Beneficially Owned Transaction(s)		Form:	7. Nature of Indirect Beneficial Ownership	
								Code	V	Amou	(A) o		rice				or Indirect (I) (Instr. 4)	
Common Stock				7/31/2020				G		520	D	\$	60	36	36565.703		D	
Common Stock															546.74		I	by 401(k) Plan
	Tab	ole II - De	rivative					,	e.g.,	puts,	calls, wa	arra	nts	s, options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative		Executio	A. Deemed (Instance) A. Texacution (Instance)		Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			Securities U		es Underlying ive Security	Underlying Derivative Security		10. Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			C	ode	V	(A)	(D)	Date Exer	cisable	Expiration Date	Title		amount or Number of hares		Following Reported Transaction(s (Instr. 4)	or Indirect	

Explanation of Responses:

Reporting Owners

Paparting Ovener Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Richardson Scott A C/O CELANESE CORPORATION 222 W LAS COLINAS BLVD., SUITE 900N IRVING, TX 75039			EVP & CFO				

Signatures

/s/ Adam R. Santosuosso, Attorney-in-Fact for Scott A. Richardson	8/4/2020
**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.