

CELANESE CORP Reported by WALTERS FARAH M

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 10/29/08 for the Period Ending 10/27/08

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

IRVING, TX, 75039-5421

Telephone 972-443-4000

CIK 0001306830

Symbol CE

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

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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

. 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)						
WALTERS	FARAH	M			C	elan	ese C	ORP [CE]								
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							X _ Director 10% Owner Officer (give title below) Other (specify below)				below)		
C/O CELAN CORPORAT FREEWAY		501 W. I	LBJ					10	/27/	2008								
FREEWAY	(Str	eet)			4.	If An	nendm	ent, Date	Orig	inal Fil	ed (MM/I	DD/YY	YY)	6. Individual of	or Joint/G	roup Filing	(Check Appl	icable Line)
DALLAS, T	X 75234 ity) (Sta	ate) (Z	iip)											X Form filed by		rting Person One Reporting F	'erson	
			Tabl	le I - N	on-De	erivat	ive Sec	curities A	cqui	ired, Di	isposed	of, or	Be	neficially Own	ed			
1. Title of Security (Instr. 3) 2. Trans. Da					2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acquired (A Disposed of (D) (Instr. 3, 4 and 5)		red (A)		5. Amount of Secur Following Reported (Instr. 3 and 4)			Ownership Form: Bene Direct (D) Own	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	V	Amount	(A) or (D)	Price	e				(I) (Instr. 4)	(msu. 4)
Series A Common Stock 10/27/200			2008	3		P		4000	A	\$12.40	<u>(1)</u>		7000		D			
	Tab	ole II - Dei	rivativ	ve Seci	urities	Bene	ficially	y Owned	(e.g	. , puts	, calls, v	varrai	nts,	, options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. D Execu Date,	ıtion	4. Trans (Instr. 8	rans. Code r. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				Expiration Date S			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security				Code	V	(A)	(D)	Da Ex	ate ercisable	Expiration Date	Title		nount or Number of ares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

(1) The reported purchase price in this line is a weighted average purchase price. The prices actually paid range from \$12.36 to \$12.41. The reporting person will provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, full information regarding the number of shares purchased at each separate price within the range.

Reporting Owners

reporting 5 whers								
Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
WALTERS FARAH M C/O CELANESE CORPORATION 1601 W. LBJ FREEWAY DALLAS, TX 75234	X							

Signatures

/s/ Robert L. Villasenor, Attorney-in-Fact for Farah M. Walters 10/29/2008

Date

**Signature of Reporting Person

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).

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.