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Celanese Corj Form 4	р										
August 15, 20)16										
FORM	Л						E COMMISSIO		PPROVAL		
	N OMB Number:	3235-0287									
Check this if no longe subject to Section 16 Form 4 or Form 5	er STATEN 5.		DWNERSHIP OF nange Act of 1934,	Estimated burden ho response	Expires:January 31, 2005Estimated average burden hours per response0.5						
obligations may contin <i>See</i> Instruct 1(b).	nue. Section 17(Jtility Hol nvestment	•	- ·	ct of 1935 or Secti E 1940	on			
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person * Sutton Scott McDougald2 System				er Name an		Trading	5. Relationship of Reporting Person(s) to Issuer				
				se Corp [-		(Check all applicable)				
(1				of Earliest T Day/Year) 2016	ransaction		Director 10% Owner X Officer (give title Other (specify below) below) EVP & Pres, Materials Solution				
COLINAS D	(Street)	501	1 If Am	endment D	ate Origina	1	6 Individual or	6. Individual or Joint/Group Filing(Check			
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting						
IRVING, TX	75039						Person	More than One N	epotting		
(City)	(State)	(Zip)	Tal	ole I - Non-l	Derivative	Securities	Acquired, Disposed	of, or Beneficia	ally Owned		
	2. Transaction Date Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V		(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. 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. SEC 1474											
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction of Derivative	Expiration Date	Underlying Securities	Deriva

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		Securi (Instr.	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	<u>(1)</u>	08/11/2016		А	3.593		(2)	(2)	Series A Common Stock	3.593	\$ 66

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Sutton Scott McDougald C/O CELANESE CORPORATION 222 W LAS COLINAS BLVD, SUITE 900N IRVING, TX 75039			EVP & Pres, Materials Solution				
Signatures							
/s/ Jacqueline R. Hall, attorney-in-fact for Scot Sutton	t McDoug	gald	08/15/2016				
**Signature of Reporting Person			Date				

Explanation of Responses:

- * 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).
- (1) Each share of phantom stock represents the right to receive the cash value of one share of Series A Common Stock.

The reported phantom stock represents dividend equivalents on compensation deferred under the Company's 2008 Deferred

(2) Compensation Plan (the "Plan"). As provided by the Plan, the reporting person may transfer the phantom stock account into an alternative investment account at any time. The shares of phantom stock become payable in cash, subject to certain conditions, on the earlier of the date previously elected by the reporting person to receive payment or the reporting person's termination of employment.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.