FORM	4
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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

(Print or Type Responses	5)										
1. Name and Address of STRYKER DAVID	2. Issuer Name <b>and</b> Ticker or Trading Symbol Huntsman CORP [HUN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) 10003 WOODLOC	3. Date of Earliest Transaction (Month/Day/Year) 02/07/2019						X         Officer (give title below)         Other (specify below)           Exec VP, GC and Sec				
THE WOODLAND	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Zip)	Table I - Non-Derivative Securities Acqu					iired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	ction	(A) or D	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Beneficial Ownership
				Code	v	Amount		Price		(I) (Instr. 4)	
Common Stock		02/07/2019		F		1,601 ( <u>1)</u>	D	\$ 21.87	177,930	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information

SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature				
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Numl	ber	and Expiration Date		and Expiration Date		and Expiration Date Amount of		unt of	Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year) U		(Month/Day/Year)		(Month/Day/Year)		Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative	,		Securities		(Instr. 5)	Beneficially	Derivative	Ownership				
	Derivative					Secur				(Instr. 3 and			Owned	Security:	(Instr. 4)				
	Security					Acqu	ired			4)			Following	Direct (D)					
						(A) o							1	or Indirect					
						Dispo							Transaction(s)						
						of (D	·						(Instr. 4)	(Instr. 4)					
						(Instr													
						4, and	15)												
											Amount								
								Date	Expiration		or								
								Exercisable	*	Title	Number								
								Excicisable	Date		of								
				Code	V	(A)	(D)				Shares								

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
STRYKER DAVID M 10003 WOODLOCH FOREST DRIVE THE WOODLANDS, TX 77380			Exec VP, GC and Sec				

# Signatures

Fan (Frank) Wu, by Power of Attorney	02/11/2019
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) Shares automatically withheld upon vesting of restricted stock to satisfy tax withholding obligations.

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.