UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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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).

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) 1. Name and Address of Reporting Person * SHOEMAKER ALVIN V			2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) C/O HUNTSMAN CORPORATION, 500 HUNTSMAN WAY			3. Date of Earliest Transaction (Month/Day/Year) 02/20/2007					-					low)
(Street) SALT LAKE CITY, UT 84108			4. If Amendment, Date Original Filed(Month/Day/Year)					-	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)		(A) (D)	4. Securities Acquire (A) or Disposed of		f	5. Amount of Se Beneficially Ov		Following (s)	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Co	de	V Amo			Price				(I)	msu. 4)
	02/20/2007		A	L	6,39	93 A	A 5	\$ 0	15,280			D	
				uire	d, Dispose	ed of, o	or Bene	eficiall	·		trol numbei	•	
3. Transaction Date (Month/Day/Yea	3A. Deemed Execution Date, any	4. te, if Transaction Code Year) (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Tit Amo Unde Secur	ount of erlying rities		Derivative Securities Beneficially Owned Following Reported	Ownershi Form of Derivative Security: Direct (D) or Indirect	Beneficia Ownershi (Instr. 4)	
					Date	Exp	piration te	Title	Amount or Number				
a	LVIN V (First) N CORPORA AY (Street) TY, UT 84108 (State) a separate line for Date (Month/Day/	LVIN V (First) (Middle) N CORPORATION, 500 AY (Street) TY, UT 84108 (State) (Zip) 2. Transaction Date (Month/Day/Year) 02/20/2007 a separate line for each class of securing the separate line for each class of securing the line for each class of the	LVIN V (First) (Middle) N CORPORATION, 500 AY (Street) 4. If Amendment, Ty, UT 84108 (State) (Zip) Ta 2. Transaction Date (Month/Day/Year) 02/20/2007 24. Deemed Execution Date, if any (Month/Day/Year) 02/20/2007 Table II - Derivative Securities beneficially over the company of the company of the company (Month/Day/Year) Table II - Derivative Securities beneficially over the company of the company o	AY (Street) (State) (State) (State) (Zip) (State) (Zip) (Month/Day/Year) (Month/Day/Year) (A) (Code (e.g., puts, calls, warrants any (Month/Day/Year) (B) (Month/Day/Year) (Code (Instr. Securities beneficially owned displayed in the composition of	AY (Street) (State) (State) (Zip) (State) (Zip) (State) (Zip) (A) (Month/Day/Year) (Month/Day/Year) (Code (Month/Day/Year) (A) (A) (B) (State) (Zip) (A) (A) (A) (A) (A) (A) (B) (A) (B) (Code (A) (A) (A) (A) (A) (A) (B) (B)	State Code Code	A Code V Amount	A A A A A A A A A A	A A A A A A A A A A	A Date Code Cod	LVIN V	Check all applications Check all applicati	LVIN V Huntsman CORP [HUN] (First) (Middle) (First) (Middle) (Mid

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SHOEMAKER ALVIN V C/O HUNTSMAN CORPORATION 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108	X					

Signatures

Rachel K. Muir, by power of attorney	02/22/2007
**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) These shares of restricted stock granted under the Huntsman Stock Incentive Plan vest in three equal annual installments beginning February 20, 2008.

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.