FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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* DULA SONIA		2. Issuer Name and Ticker or Trading Symbol Huntsman CORP [HUN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 10003 WOODLOCH FOREST DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 02/17/2022						Officer (give title below) Other (specify below)				
(Street) THE WOODLANDS, TX 77380			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)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficial					Beneficially (Owned				
1.Title of Security (Instr. 3)	Date	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)		4. Securities Acquir (A) or Disposed of ((Instr. 3, 4 and 5)		of (D)			vned Following	6. Ownership Form:	Beneficial
				Code	V	Amount	(A) or (D)	Price	(mstr. 3 a	3 and 4)	or (I)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock	02/	17/2022		A	3	3,533	A	\$ 0	13,257			D	
		Table II - F	Derivative Securiti	es Acquir	d Dier	nsed of	or Ren	eficial	ly Owned		trol numbe		
		Table II - I	Derivative Securiti	es Acquir	ed. Disr	osed of	f. or Ben	eficial	lv Owned				
Derivative Conversion I	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Data	re, if Transaction Code (Instr. 8)	rrants, op 5. Number of Derivative Securities Acquired (A) or Disposed of (D)	6. Date and Ex (Mont)		ble secur sable Date	7. Ti Amo Und	itle and bunt of erlying urities and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	of 10. Owners Form o Derivat Securit Direct (or Indir	Owners (Instr. 4
Derivative Conversion I Security or Exercise (Price of Derivative	Date	3A. Deemed Execution Data	e.g., puts, calls, wa 4. Transaction Code Year) (Instr. 8)	nrants, op 5. Number of Derivative Securities Acquired (A) or Disposed	6. Date and Ex (Mont)	onverti Exerci piration	ble secur sable Date	7. Ti Amo Und Secu (Inst	itle and ount of erlying urities	Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners Form o Derivat Security Direct (or Indir (s) (I)	hip of Indir Benefic Owners (Instr. 4
Derivative Conversion I Security or Exercise (Price of Derivative	Date	3A. Deemed Execution Data	e.g., puts, calls, wa 4. Transaction Code Year) (Instr. 8)	rrants, op 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	6. Date and Ex (Mont)	onverti Exerci piration	ble secur sable Date	7. Ti Amo Und Secu (Inst	itle and ount of erlying urities	Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners Form o Derivat Security Direct (or Indir (s) (I)	hip of B ive O/: (ID) ect

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
DULA SONIA 10003 WOODLOCH FOREST DRIVE THE WOODLANDS, TX 77380	X				

Signatures

Rachel Muir, by Power of Attorney	02/22/2022
**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).

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.