Edgar Filing: SHOEMAKER ALVIN V - Form 4

SHOEMAKER A	ALVIN V											
Form 4 September 23, 20)10											
								OMB A	PPROVAL			
FORM 4	UNITED	STATES		RITIES A shington			COMMISSIO	N OMB Number:	3235-0287			
Check this box if no longer								Expires:	January 31, 2005			
subject to Section 16. Form 4 or	STATEN	AENT OI	CHAI		BENEF	ICIAL OV	WNERSHIP OF	Estimated burden hou response	average urs per			
Form 5 obligations may continue. <i>See</i> Instruction 1(b).	Section 17(a) of the l	Public U	Itility Hol	ding Cor		nge Act of 1934, of 1935 or Section 940	·				
(Print or Type Respo	nses)											
1. Name and Addres	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer							
				nan CORI			(Check all applicable)					
(Last)	(First) (I	Middle)		of Earliest T Day/Year)	ransaction		X Director	10% Owner				
C/O HUNTSMA CORPORATION WAY		TSMAN	09/21/2	-			Officer (giv below)		ner (specify			
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) SALT LAKE CITY, UT 84108						ıl	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)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned			
	ansaction Date hth/Day/Year)	Execution any	ution Date, if TransactionAcquired (A) or Sec Code Disposed of (D) Ber hth/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Ow Fol (A) Tra				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 cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly.					
	1				Perso inform requir	ons who res nation cont red to responses ays a current	spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)			
	Tab					posed of, or convertible	Beneficially Owner securities)	I				

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8.1
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	iorDerivative	Expiration Date	Underlying Securities	De

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired or Dispose (D) (Instr. 3, 4 and 5)	(A) ed of	(Month/Day/	/Year)	(Instr. 3 and	4)	Sec (In
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(1)</u>	09/21/2010		А	42,095		(2)	(2)	Common Stock	42,095	

Reporting Owners

Reporting Owner Name / Address		Relationships			
	Director	10% Owner	Officer	Other	
SHOEMAKER ALVIN V C/O HUNTSMAN CORPORATION 500 HUNTSMAN WAY SALT LAKE CITY, UT 84108	Х				
Signatures					
Sean H. Pettey, By Power of Attorney	09/2	23/2010			
**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 restricted stock unit represents a contingent right to receive one share of Huntsman common stock.

(2) These restricted stock units granted under the Huntsman Stock Incentive Plan vest in three equal annual installments beginning
 (2) September 21, 2011, provided that, in the event the reporting person is no longer serving on the Huntsman Corporation board before these restricted stock units are fully vested, and the reporting person was not removed for cause, the vesting of these restricted stock units will

accelerate and become fully vested on the date of the reporting person's departure from the Huntsman Corporation board.

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.