## Edgar Filing: Hulme Paul G - Form 4

| Form 4                                                                                                                                                                            | -                                       |                                                                                                   |                   |                                                  |                            |         |                                                                                                         |                                                                                                                    |                                                                            |                                                                   |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------|-------------------|--------------------------------------------------|----------------------------|---------|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------------------------------|--|
| June 17, 20                                                                                                                                                                       | ЛД                                      |                                                                                                   |                   |                                                  |                            |         |                                                                                                         |                                                                                                                    | OMB AF                                                                     | PROVAL                                                            |  |
|                                                                                                                                                                                   | UNITED                                  | UNITED STATES SECURITIES AND EXCHANGE COMMISS<br>Washington, D.C. 20549                           |                   |                                                  |                            |         |                                                                                                         |                                                                                                                    | OMB<br>Number:                                                             | 3235-0287                                                         |  |
| Check tl<br>if no lor<br>subject t<br>Section<br>Form 4<br>Form 5                                                                                                                 | so<br>16.<br>or<br>Filed pur            | x STATEMENT OF CHANGES IN BENEFI<br>SECURITIES<br>Filed pursuant to Section 16(a) of the Securiti |                   |                                                  |                            |         | Exchange                                                                                                | Act of 1934,                                                                                                       | Expires:<br>Estimated a<br>burden hour<br>response                         |                                                                   |  |
| obligations<br>may continue.<br>See InstructionSection 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940<br>1(b). |                                         |                                                                                                   |                   |                                                  |                            |         |                                                                                                         |                                                                                                                    |                                                                            |                                                                   |  |
| (Print or Type                                                                                                                                                                    | Responses)                              |                                                                                                   |                   |                                                  |                            |         |                                                                                                         |                                                                                                                    |                                                                            |                                                                   |  |
| Hulme Paul G Symbol                                                                                                                                                               |                                         |                                                                                                   |                   | 8                                                |                            |         |                                                                                                         | 5. Relationship of Reporting Person(s) to<br>Issuer                                                                |                                                                            |                                                                   |  |
| (Last)                                                                                                                                                                            | (First) (I                              | Middle)                                                                                           |                   | of Earliest T                                    |                            |         |                                                                                                         | (Check all applicable)                                                                                             |                                                                            |                                                                   |  |
| (Month/<br>500 HUNTSMAN WAY<br>(Street) 4. If Am                                                                                                                                  |                                         |                                                                                                   |                   | u/Day/Year)                                      |                            |         |                                                                                                         | Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>Division President                  |                                                                            |                                                                   |  |
|                                                                                                                                                                                   |                                         |                                                                                                   | Month/Day/Year) A |                                                  |                            |         | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person |                                                                                                                    |                                                                            |                                                                   |  |
| SALT LAF                                                                                                                                                                          | KE CITY, UT 841                         | 08                                                                                                |                   |                                                  |                            |         |                                                                                                         | Form filed by Mo<br>Person                                                                                         | ore than One Rep                                                           | porting                                                           |  |
| (City)                                                                                                                                                                            | (State)                                 | (Zip)                                                                                             | Tab               | ole I - Non-                                     | Derivative                 | Secur   | ities Acqu                                                                                              | ired, Disposed of,                                                                                                 | or Beneficiall                                                             | y Owned                                                           |  |
| 1.Title of<br>Security<br>(Instr. 3)                                                                                                                                              | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemo<br>Execution<br>any<br>(Month/Da                                                        | Date, if          | 3.<br>Transactic<br>Code<br>(Instr. 8)<br>Code V | omr Dispos<br>(Instr. 3, 4 | ed of ( |                                                                                                         | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Common<br>Stock                                                                                                                                                                   | 06/16/2011                              |                                                                                                   |                   | S                                                | 45,045                     | , í     | \$<br>17.3831<br>(1)                                                                                    | 90,634                                                                                                             | 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 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)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | nt of<br>lying                         | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|----------------------------------------------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
|                                                     |                                                                       |                                         |                                                             | Code V                                 | (A) (D)                                                                                                                 | Date<br>Exercisable | Expiration<br>Date | Title                                        | Amount<br>or<br>Number<br>of<br>Shares |                                                     |                                                                            |

## **Reporting Owners**

| Reporting Owner Name / Address                               | Relationships |           |                       |       |  |  |  |  |
|--------------------------------------------------------------|---------------|-----------|-----------------------|-------|--|--|--|--|
|                                                              | Director      | 10% Owner | Officer               | Other |  |  |  |  |
| Hulme Paul G<br>500 HUNTSMAN WAY<br>SALT LAKE CITY, UT 84108 |               |           | Division<br>President |       |  |  |  |  |
| Signatures                                                   |               |           |                       |       |  |  |  |  |
| Sean H. Pettey, by Power of Attorney                         | С             | 6/17/2011 |                       |       |  |  |  |  |

<u>\*\*</u>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).

The price reported in Column 4 with respect to the shares sold on June 16, 2011 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$17.17 to \$17.5001 per share. The Reporting Person has provided to the Issuer, and

(1) Inductive transactions at prices ranging from \$17.17 to \$17.5001 per share. The Reporting Ferson has provided to the Issuer, and undertakes to provide to any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in Footnote (1) to this Form 4.

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.