Edgar Filing: CROWNOVER JAMES W - Form 4

CROWNOVE Form 4	ER JAMES W										
March 05, 20	13										
FORM	Δ									PPROVAL	
	UNITE	D STATES		ITIES Al hington, 1			NGE (COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average burden hours per	
may contin	Form 5 obligations may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type Ro	esponses)										
CROWNOVER JAMES W Sym			Symbol	Issuer Name and Ticker or Trading abol emtura CORP [CHMT]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mo			(Month/Da	Date of Earliest Transaction Month/Day/Year) 3/01/2013				X_ Director 10% Owner Officer (give title Other (specify below) below)			
			endment, Date Original onth/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 					
MIDDLEBU	RY, CT 06749	9						Person	Nore than One Ro	eporung	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution D any (Month/Day/Year)		n Date, if Transactio Code		4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common	02/01/2012			Code V	Amount 4,390		Price	Transaction(s) (Instr. 3 and 4)	D		
Stock	03/01/2013			А	<u>(1)</u>	A	\$0	42,458 <u>(2)</u>	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)

Edgar Filing:	CROWNOVER	JAMES W - F	orm 4
- 3 3			

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	ionNumber of				Amou Unde Secur	le and unt of rlying rities : 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	/ (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer Othe					
CROWNOVER JAMES W								
199 BENSON ROAD	Х							
MIDDLEBURY, CT 06749								
Signatures								
/s/ Alan Schutzman by Power of Attorney	of	03/05/2013						
<u>**</u> Signature of Reporting Person		D	ate					

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) Grant of shares under Chemtura Corporation Annual Equity Grant program for non-employee directors.

Includes an aggregate of 286 supplemental shares received, subsequent to the date of the reporting person's most recent filing on Form 4 (2) providing Table I information, in connection with the Joint Chapter 11 Plan of Chemtura Corporation, et al., dated August 4, 2010, as amended, which was confirmed by the U.S. Bankruptcy Court for the Southern District of New York on November 3, 2010.

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.