Edgar Filing: DowDuPont Inc. - Form 4

Form 4	it Inc.										
November (06, 2018										
FORM	ЛЛ								-	APPROVAL	
	STATES S	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							3235-0287		
Check t if no lor subject	MENT OF	F CHANGES IN BENEFICIAL OWNERS						Expires: Estimate	January 31, 2005 d average		
Section Form 4 Form 5 obligati may co <i>See</i> Inst 1(b).	or Filed pu ons ntinue.	(a) of the Pu	ıblic U	16(a) of t	olding Co	mpa	ny Act of	e Act of 1934, 1935 or Sectio 0	burden h response	ours per	
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> DowDuPont Inc.			Symbol					5. Relationship of Reporting Person(s) to Issuer			
			e	resh Solu		-	GFS]	(Check all applicable)			
(Last) 2211 H.H.	(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 211 H.H. DOW WAY 11/02/2018				Transactior	1		Director Officer (give title Other (specify below) below)			
	(Street)			nendment, I onth/Day/Ye	-	al		6. Individual or J Applicable Line) Form filed by 0	-	-	
MIDLANI	D, MI 48674							_X_ Form filed by Person	More than One	e Reporting	
(City)	(State)	(Zip)	Tal	ble I - Non	-Derivativ	e Seci	urities Acq	uired, Disposed o	of, or Benefic	ially Owned	
1.Title of Security (Instr. 3)	ity (Month/Day/Year) Execution Date, if			3. 4. Securities Acquired (A) Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				SecuritiesCBeneficiallyFOwnedDFollowingOReported(ITransaction(s)(I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
G				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock, par value \$0.0001 per share	11/02/2018			P <u>(1)</u>	29,735	A	\$ 5.7541 (2)	20,642,020	I	Through wholly-owned subsidiary	
Common Stock, par value \$0.0001 per share	11/05/2018			P <u>(1)</u>	31,828	A	\$ 5.7249 (<u>3</u>)	20,673,848	Ι	Through wholly-owned subsidiary	

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.

Date

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips				
	Director	10% Owner	Officer	Other			
DowDuPont Inc. 2211 H.H. DOW WAY MIDLAND, MI 48674		Х					
DOW CHEMICAL CO /DE/ 2211 H.H. DOW WAY MIDLAND, MI 48642		Х					
Signatures							
DOWDUPONT INC., /s/ Amy E. Wilson, Authorized Officer							
<u>**</u> Signature of Reporting Person							

THE DOW CHEMICAL COMPANY, /s/ Amy E. Wilson, Authorized Officer	11/06/2018
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**Signature of Reporting Person

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) Purchases pursuant to a 10b5-1 plan. Reporting Person agrees to provide upon request by the Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares purchased or sold at each separate price.
- (2) Weighted average purchase price. All trades occurred at a range of prices from \$5.69 to \$5.82.

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(3) Weighted average purchase price. All trades occurred at a range of prices from \$5.67 to \$5.80.

Remarks:

Exhibit 99.1 Joint Filer Information, incorporated herein by reference.

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.