FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF (	CHANGES	IN RENE	FICΙΔΙ	OWNERS	ΗΙΡ
STATEMENT	OF (	SHANGES		FICIAL	OWNERS	ПІГ

l	OMB APPRO	VAL
	OMB Number:	3235-0287
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l	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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* <u>Trojanowski Amy</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol Chemours Co [ CC ]								heck a	all app Direc	licable) tor	g Person(s) to I	Owner		
(Last) (First) (Middle)  C/O THE CHEMOURS COMPANY  1007 MARKET STREET					3. Date of Earliest Transaction (Month/Day/Year) 06/30/2016									X Officer (give title Other (specify below)  VP and Controller					
(Street) WILMINGTON DE 19899					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(St	ate) (	Zip)			1 3.33.1													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acc Disposed Of (D) 5)				nd Securi Benefi		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									v	Amount	() ()	A) or D)	Price	- 11	Transa	ction(s) 3 and 4)		(111341.4)	
Common Stock 06/30/				/2016			J <sup>(1)</sup>		43.060	)2	D	\$8	24	10	,974 <sup>(2)</sup>	D			
	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)	Derivative Conversion Date Execution D Security or Exercise (Month/Day/Year) if any		n Date, ay/Year)	Transaction Code (Instr. 8)  5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  Code V (A) (D)		Expiration (Month/E	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares		ount nber			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

1. This disposition related to investments under one or more deferred compensation/benefit plans of E. I. du Pont de Nemours and Company ("DuPont") that the reporting person participated in when she was an employee of DuPont. Following Chemours' separation from DuPont on July 1, 2015, Chemours stock remained as an investment option under the DuPont plans until June 30, 2016. On June 30, 2016, the reporting person's investment was automatically allocated to other investment options according to the terms of the DuPont plans. The reporting person did not sell shares of Chemours stock as part of this

2. Includes directly owned shares, unvested restricted stock units and dividend equivalent units.

/s/ Brian Morrisey, attorney-in-07/01/2016 fact for Amy Trojanowski

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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.

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 Number.