FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
1	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

1. Name and Address of Reporting Person*  VERGNANO MARK P					2. Issuer Name and Ticker or Trading Symbol Chemours Co [ CC ]								ck all application	able)		Owner		
(Last) (First) (Middle) C/O THE CHEMOURS COMPANY						3. Date of Earliest Transaction (Month/Day/Year) 05/08/2018								below)	Officer (give title below)  President an		er (specify w)	
1007 MARKET STREET  (Street)  WILMINGTON DE 19899					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting				
(City)	(	State)	(Zip)											Person	Person			
		Та	ble I - No	on-Dei	rivativ	ve S	ecur	ities Ac	quired	, Di	sposed c	of, or Be	neficially	/ Owned				
Date				Date			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. ) 8)				l (A) or . 3, 4 and 5)	5. Amour Securitie Beneficia Owned F	es ally	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)		(Instr. 4)	
Common Stock				05/0	05/08/2018				<b>M</b> <sup>(1)</sup>		144,43	8 A \$12		394	394,299			
Common Stock 05/08/				8/201	2018			S <sup>(1)</sup>		144,43	8 D	\$50.520	249	,861	D			
Common Stock 05/09/2					9/201	2018			<b>M</b> <sup>(1)</sup>		55,713	3 A \$12.96		305	305,574			
Common Stock 05/09/2					9/201	2018		S <sup>(1)</sup>		55,713	D	\$50.34	3) 249,	861(4)	D			
Common Stock														104	,100	I	By GRAT	
			Table II								oosed of, converti			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Da	Date, Transacti Code (Ins					6. Date Exercisable Expiration Date (Month/Day/Year)		te	of Securitie		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction	Owner: Form: Direct or Indi	Beneficial Ownership ect (Instr. 4)	
					Code	ode V	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares	unt (Instr. 4) ber	On(3)			
Stock Option (Right to Buy)	\$12.96	05/08/2018			М			144,438	(5)		02/05/2019	Common Stock	144,438	\$0	55,71	3 D		
Stock Option (Right to Buy)	\$12.96	05/09/2018			M <sup>(1)</sup>			55,713	(5)		02/05/2019	Common Stock	55,713	\$0	0	D		

## **Explanation of Responses:**

- 1. The stock option exercises and sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 15, 2018.
- $2.\ Price\ reported\ is\ a\ weighted\ average.\ Shares\ were\ sold\ in\ multiple\ transactions\ at\ prices\ ranging\ from\ \$50.00\ to\ \$50.86.$
- $3.\ Price\ reported\ is\ a\ weighted\ average.\ Shares\ were\ sold\ in\ multiple\ transactions\ at\ prices\ ranging\ from\ \$50.00\ to\ \$50.45.$
- 4. Includes restricted stock units and dividend equivalent units.
- 5. These options were issued to the reporting person while he was employed by DuPont and were converted to Chemours options in connection with the Company's separation from DuPont.

/s/ Brian Morrissey, attorney-infact for Mark P. Vergnano 05/10/2018

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.