FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

HILO F	AND EXCHANGE	COMMISSI
A / In ! 4	D 0 00540	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box if no longer subject to

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). Se	ee Instruction 1	0.																				
Name and Address of Reporting Person* Covern Aliotor						2. Issuer Name and Ticker or Trading Symbol Chemours Co [CC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Cowan Alister															1	✓ Director			10% O	wner		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 11/15/2024									Officer (give title below)				Other (s	specify		
C/O THI	E CHEMOU	JRS COMPANY	7			17/10/2021																
1007 MARKET STREET																						
					4. lf	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)															Form filed by One Reporting Person							
WILMINGTON DE 19899															Form filed by More than One Reporting							
															Person							
(City)	(Sta	ate) (Z	Zip)																			
		Table	I - N	lon-Deriva	tive	Secui	rities	Ac	quir	ed, D	isposed	of,	, or I	Benefic	ially	own	ed					
1. Title of S	Security (Inst	r. 3)		2. Transaction	2/	2A. Deemed 3.					4. Securities Acquired (A) or				5. Amount of				wnership	7. Nature		
Date			Date (Month/Day/Ye	ar) Executio if any (Month/D			` c	Transaction Code (Instr. 8)		Disposed Of (D) (Instr. 3, 4 an				Benefi Owned		icially (D d Following In		orm: Direct D) or Idirect (I) nstr. 4)	of Indirect Beneficial Ownership (Instr. 4)			
								G	Code	v	Amount		A) or D)	Price		Reported Transaction(s (Instr. 3 and 4		(IIISI	50.4)	(msu. 4)		
Common Stock 11/15/202					4				A		10,200		Α	\$19.26	19(1) 21,582.761(2)			D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
				(e.g., pu																		
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Month/Day/Year) if			xecution Date, any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)				9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(A) (D)		te ercisable	Expirati Date	on	Title	Amount or Number of Shares	er							

- 1. The price reported is a weighted average price. These shares were purchased in multiple transactions at per share prices ranging from \$19.16 to \$19.30. The Reporting Person undertakes to provide upon request to the SEC staff, the Issuer, or any stockholder of the Issuer, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.
- 2. Includes directly owned shares, stock units and dividend equivalent units.

/s/ Kristine Wellman, Attorney-in-Fact

11/19/2024

** 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.