### Edgar Filing: DowDuPont Inc. - Form 4

DowDuPon Form 4	t Inc.									
October 04	, 2018									
FORM			CECU	DITIES		ou	ANCEO		т	APPROVAL
Washington, D.C. 20549									OMB Number:	
Check this box if no longer								Expires:	January 31, 2005	
In the tongersubject toSection 16.Form 4 orForm 5obligationsobligationsobligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or S						e Act of 1934,	burden h response	tted average n hours per nse 0.5		
may con <i>See</i> Inst 1(b).	nunue.			•	nt Compa	-	•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(Print or Type	Responses)									
1. Name and DowDuPo	Address of Reporting nt Inc.		Symbol		nd Ticker o Itions, Ind		-	5. Relationship o Issuer		
(Last)	(First) (Middle) 3. Date of Earliest Transaction (Check						k all applicable)			
2211 H.H.	211 H.H. DOW WAY(Month/Day/Year) Director211 H.H. DOW WAY10/02/2018 Officer (give below)					title Other (specify below)				
	(Street)			nendment, I onth/Day/Ye	Date Origin ear)	al		6. Individual or J Applicable Line) Form filed by	One Reporting	Person
MIDLANI	D, MI 48674							_X_ Form filed by Person	More than One	e Reporting
(City)	(State)	(Zip)	Ta	ble I - Non	-Derivativ	e Seci	ırities Acq	uired, Disposed o	of, or Benefic	cially Owned
1.Title of Security (Instr. 3)	rity (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				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, par value \$0.0001 per share	10/02/2018			Code V P <u>(1)</u>	Amount 34,295	(D) A	Price \$ 6.1102 (2)		I	Through wholly-owned subsidiary
Common Stock, par value \$0.0001 per share	10/03/2018			P <u>(1)</u>	33,619	A	\$ 6.2106 (3)	19,950,853	I	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	
<b>F B B F</b>	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	r 10/04/2018			
<u>**</u> Signati	Date			

THE DOW CHEMICAL COMPANY, /s/ Amy E. Wilson, Authorized Officer	10/04/2018
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<u>\*\*</u>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 \$5.98 to \$6.20.

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(3) Weighted average purchase price. All trades occurred at a range of prices from \$6.13 to \$6.26.

#### **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.