DowDuPont Inc. Form 4 November 08, 2018

Check this box

if no longer

Section 16.

Form 4 or

Form 5

subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

2. Issuer Name and Ticker or Trading

OMB Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

Stock, par

11/07/2018

value

\$0.0001

per share

(Print or Type Responses)

1. Name and Address of Reporting Person *

DowDuPont Inc.			Symbol					Issuer			
			AgroFresh Solutions, Inc. [AGFS]					(Check all applicable)			
(Last)	(First)	(Middle)			t Transactio	n				1000	
2211 H.H. DOW WAY			(Month/Day/Year) 11/06/2018					Director Officer (gives)		10% Owner Other (specify	
	(Street)		4. If Ar	nendment,	Date Origi	nal		6. Individual or	Joint/Group F	Filing(Check	
				Filed(Month/Day/Year)				Applicable Line) Form filed by One Reporting Person			
MIDLAND, MI 48674								_X_ Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Ta	ble I - No	n-Derivativ	e Seci	urities Acq	uired, Disposed	of, or Benefic	cially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any (Month/Da	Date, if	3. Transact Code (Instr. 8)	ioror Dispos (Instr. 3,	sed of		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)	
Stock, par value \$0.0001 per share Common	11/06/2018			P <u>(1)</u>	31,828	A	\$ 5.7037 (2)	20,705,676	I	Through wholly-owned subsidiary	

\$

(3)

5.7668

20,737,015 I

31,339 A

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

 $P^{(1)}$

Through

subsidiary

wholly-owned

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4.	5. onNumber	6. Date Exerc Expiration D		7. Titl		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Tear)	any (Month/Day/Year)	Code (Instr. 8)	of	(Month/Day/e		Under Securi	rlying	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
DowDuPont Inc. 2211 H.H. DOW WAY MIDLAND, MI 48674		X					
DOW CHEMICAL CO /DE/ 2211 H.H. DOW WAY MIDLAND, MI 48642		X					

Signatures

DOWDUPONT INC., /s/ Amy E. Wilson, Authorized Officer	11/08/2018
**Signature of Reporting Person	Date
THE DOW CHEMICAL COMPANY, /s/ Amy E. Wilson, Authorized Officer	11/08/2018
**Signature of Reporting Person	Date

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 \$5.66 to \$5.76.

Reporting Owners 2

SEC 1474

(9-02)

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(3) Weighted average purchase price. All trades occurred at a range of prices from \$5.64 to \$5.82.

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.