DOVER ROBERT A Form 3 November 07, 2011 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Ad Person <u>*</u> DOVER R	•	U	2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol Chemtura CORP [CHMT]					
(Last)	(First)	(Middle)	11/01/2011		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)			
199 BENSON	N ROAD					× ·	, ,			
(Street)				(Check	(Check all applicable)		6. Individual or Joint/Group			
MIDDLEBU	RY, CTÂ	à 06749		X Directo Officer (give title below	r 10% O Other w) (specify below	_X_Form v) Person	eck Applicable Line) filed by One Reporting filed by More than One Person			
(City)	(State)	(Zip)	Table	e I - Non-Derivat	ive Securitie	s Beneficiall	y Owned			
1.Title of Securit (Instr. 4)	ty			oount of Securities icially Owned 4)	Ownership	4. Nature of Ind Ownership (Instr. 5)	irect Beneficial			
Reminder: Report owned directly of	-	te line for ea	ch class of securities b	eneficially S	EC 1473 (7-02)					
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.										
Та	ble II - Deri	vative Secur	rities Beneficially Own	med (e.g., puts, calls,	warrants, optio	ons, convertible	e securities)			
1. Title of Deriva (Instr. 4)	ative Security	Expir	ration Date S (Day/Year) D	B. Title and Amount of Securities Underlying Derivative Security Instr. 4)	 4. Conversion or Exercise Price of Derivative 	- · · · · ·	6. Nature of Indirect Beneficial Ownership (Instr. 5)			

Date

Exercisable

Expiration

Title

Date

Security:

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

3235-0104

January 31,

2005

0.5

Number:

Expires:

response ...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
DOVER ROBERT A 199 BENSON ROAD MIDDLEBURY, CT 06749	ÂX	Â	Â	Â	
Signatures					
/s/ Alan Schutzman by Power of Attorney	11/07/2011				
**Signature of Reporting Person		Da	ite		

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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. 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.