

Loeser David
Form 3
April 11, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

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 Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Loeser David		(Month/Day/Year)	Celanese CORP [CE]	
(Last)	(First)	(Middle)	04/01/2005	
C/O CELANESE CORPORATION,Â 1601 W. LBJ FREEWAY			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)	(Check all applicable)			
	<input type="checkbox"/> Director		<input type="checkbox"/> 10% Owner	
	<input checked="" type="checkbox"/> Officer		<input type="checkbox"/> Other	
	(give title below)		(specify below)	
	DALLAS,Â TXÂ 75234		Sr. VP HR & Communications	
(City)	(State)	(Zip)	6. Individual or Joint/Group Filing(Check Applicable Line)	
			<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
------------------------------------	--	---	--

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

SEC 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.

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

Edgar Filing: Loeser David - Form 3

				Shares		or Indirect (I) (Instr. 5)	
Non-Qualified Stock Option (Right to Buy)	Â (1)	01/20/2015	Series A Common Stock	72,400	\$ 17.83	D	Â
Non-Qualified Stock Option (Right to Buy)	Â (2)	01/20/2015	Series A Common Stock	108,600	\$ 17.83	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Loeser David C/O CELANESE CORPORATION 1601 W. LBJ FREEWAY DALLAS, TX 75234	Â	Â	Â Sr. VP HR & Communications	Â

Signatures

Mai-Anh Nguyen, on behalf of David Loeser 04/11/2005

__Signature of Reporting Person

Date

Explanation of Responses:

* 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).

(1) Granted pursuant to the Company's 2004 Stock Incentive Plan. The options option shares will vest, subject to continued employment, with respect to 20% on each of December 31, 2005, December 31, 2006, December 31, 2007, December 31, 2008, and December 31, 2009.

(2) Granted pursuant to the Company's 2004 Stock Incentive Plan. The options option shares will vest, subject to continued employment and achievement of certain performance targets, with respect to 30% of the option shares on December 31, 2005, with respect to 30% of the option shares on December 31, 2006, with respect to 15% of the option shares on December 31, 2007, and with respect to 25% of the option shares on December 31, 2008.

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.