

FORM 4

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

OMB APPROVAL
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or
Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * DICKENS KIMBERLY L (Last) (First) (Middle) C/O UNIVAR SOLUTIONS INC., 3075 HIGHLAND PARKWAY, SUITE 200 (Street) DOWNERS GROVE, IL 60515 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol Univar Solutions Inc. [UNVR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) SVP, Chief People Officer
3. Date of Earliest Transaction (MM/DD/YYYY) <p align="center">5/7/2020</p>		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
4. If Amendment, Date Original Filed (MM/DD/YYYY)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Trans. Date	2A. Deemed Execution Date, if any	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	5/7/2020		M		1033.0000	A	\$0 (1)	1886.0000	D	
Common Stock	5/7/2020		F		293.0000 (2)	D	\$13.9100	1593.0000	D	

Table II - Derivative Securities 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. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Units (RSUs)-5	(1)	5/7/2020		M		1033.0000		(3)	(3)	Common Stock	1033.0000	\$0.0000	2065.0000	D	

Explanation of Responses:

- (1) Each restricted stock unit ("RSU") is equivalent to one share of common stock upon vesting.
- (2) Shares withheld by Registrant to satisfy the minimum statutory tax withholding requirements on settlement of restricted stock units. No shares were sold.
- (3) On May 7, 2018 the reporting person was granted 3,098 restricted stock units, vesting in three equal annual installments beginning on May 7, 2019 subject to the reporting person continuing to be employed through each such date.

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
DICKENS KIMBERLY L C/O UNIVAR SOLUTIONS INC. 3075 HIGHLAND PARKWAY, SUITE 200 DOWNERS GROVE, IL 60515			SVP, Chief People Officer	

Signatures

/s/ Noelle J. Perkins as Attorney-in-Fact for Kimberly L. Dickens

5/11/2020

**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 control number.