## Edgar Filing: CROWN HOLDINGS INC - Form 4

CROWN HC Form 4	DLDINGS INC	2									
February 16,	2016										
								OMB APPROVAL			
<b>CURIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer								Expires:	January 31, 2005		
subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERS							NERSHIP OF	Estimated average burden hours per			
Form 4 or Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange							A ( C1024	response 0.5		
obligation	• •						U	e Act of 1934, 1935 or Section	2		
may conti <i>See</i> Instru 1(b).	inue.			vestment	•	· ·			1		
(Print or Type R	Responses)										
1. Name and Address of Reporting Person *       2. Issue         TURNER JIM L       Symbol				suer Name <b>and</b> Ticker or Trading ol				5. Relationship of Reporting Person(s) to Issuer			
CROV				WN HOLDINGS INC [CCK]				(Check all applicable)			
(Last) (First) (Middle) 3. Date of 1			f Earliest Transaction				()				
ONE CROWN WAY 02/1				(Month/Day/Year)				Director	title 10% Owner		
			02/12/2	016				below)	below)		
			4. If Ame	. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed()				led(Month/Day/Year)				Applicable Line)			
PHILADEL	PHIA, PA 191	.54						_X_ Form filed by C Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any		3. Transactio Code (Instr. 8) Code V	4. Securi n(A) or Di (Instr. 3,	ties A spose	cquired d of (D)	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	
Common	02/12/2016			А	669	A	\$ 44.87	81,469	D		

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.

 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. ofNumber of Derivat Securiti Acquire (A) or Dispose of (D) (Instr. 3	r Expiration E (Month/Day ive es ed			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5		Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
TURNER JIM L ONE CROWN WAY PHILADELPHIA, PA 19154								
Signatures								
Rosemary M. Haselroth, by Po Attorney	02/16/2016							
**Signature of Reporting Perso	n		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).

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.