## Edgar Filing: CONWAY JOHN W - Form 4

| CONWAY J  | IOHN W                                  |                  |            |   |            |           |                        |   |                           |                        |  |  |
|---|---|------------------|------------|---|------------|-----------|------------------------|---|---------------------------|------------------------|--|--|
| Form 4  |   |                  |            |   |            |           |                        |   |                           |                        |  |  |
| July 30, 2018   | 8                                       |                  |            |   |            |           |                        |   |                           |                        |  |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION   |   |                  |            |   |            |           |                        |   | OMB APPROVAL              |                        |  |  |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION<br>Washington, D.C. 20549  |   |                  |            |   |            |           |                        | OMB<br>Number:  | 3235-0287                 |                        |  |  |
| Check th  |   |                  |            |   |            |           |                        |   | Expires:                  | January 31,            |  |  |
| if no longer<br>subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF  |   |                  |            |   |            |           |                        | 2005  |                           |                        |  |  |
|   | subject to<br>Section 16. SECURITIES    |                  |            |   |            |           |                        | Estimated average<br>burden hours per                         |                           |                        |  |  |
| Form 4 o  | or                                      |                  |            |   |            |           |                        |   | response 0.5              |                        |  |  |
| Form 5<br>obligation  | <b>n</b> o <b>*</b>                     |                  |            |   |            |           | •                      | e Act of 1934,  |                           |                        |  |  |
| may cont  |   |                  |            | •   | •          | · ·       | •                      | 1935 or Section   | l                         |                        |  |  |
| See Instru  |   | 30(h)            | of the In  | vestment  | Compar     | iy Ac     | ct of 1940             | 0   |                           |                        |  |  |
| 1(b).   |   |                  |            |   |            |           |                        |   |                           |                        |  |  |
| (Print or Type I  | Responses)                              |                  |            |   |            |           |                        |   |                           |                        |  |  |
| J1  | , i i i i i i i i i i i i i i i i i i i |                  |            |   |            |           |                        |   |                           |                        |  |  |
| 1. Name and Address of Reporting Person <sup>*</sup> _ 2. Issuer Name <b>and</b> Ticker or Trading 5. Relationship of |   |                  |            |   |            |           | Reporting Person(s) to |   |                           |                        |  |  |
| CONWAY  | JOHN W                                  |                  | Symbol     |   |            |           |                        | Issuer  |                           |                        |  |  |
| -   |   |                  |            | N HOLDINGS INC [CCK]  |            |           |                        | (Check all applicable)  |                           |                        |  |  |
| (Last)  | (First) (M                              | (liddle)         | 3. Date of | f Earliest Tr   | ansaction  |           |                        | (Check  |                           | )                      |  |  |
|   |   |                  | (Month/E   |   |            |           |                        | Director 10% Owner  |                           |                        |  |  |
| · · · · · · · · · · · · · · · · · · ·   |   |                  | 07/27/2    | 018   |            |           |                        | Officer (give title Other (specify below) below)              |                           |                        |  |  |
| (Street) 4 IC A   |   |                  | 4 If Ama   | mandmant. Data Original   |            |           |                        |   |                           |                        |  |  |
|   |   |                  |            | endment, Date Original<br>nth/Day/Year)   |            |           |                        | 6. Individual or Joint/Group Filing(Check<br>Applicable Line) |                           |                        |  |  |
|   |   |                  | 1 nea(mo   | nii/Duy/Tea   | )          |           |                        | _X_ Form filed by O   |                           |                        |  |  |
| PHILADELPHIA, PA 19154Form filed by More than One Reporting Person  |   |                  |            |   |            |           |                        |   |                           |                        |  |  |
| (City)  | (State)                                 | (Zip)            |            |   |            | ~         |                        |   |                           |                        |  |  |
| (City)  | (State)                                 | (Zip)            | Tabl       | le I - Non-D  | Derivative | Secur     | rities Acqu            | iired, Disposed of,   | or Beneficiall            | y Owned                |  |  |
| 1.Title of  | 2. Transaction Date                     |                  |            | 3.4. Securities Acquiredc, ifTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5) |            |           |                        | 5. Amount of  | 6.                        | 7. Nature of           |  |  |
| Security<br>(Instr. 3)  | (Month/Day/Year)                        | Execution<br>any | i Date, if |   |            |           |                        | Securities<br>Beneficially                                    | Ownership<br>Form: Direct | Indirect<br>Beneficial |  |  |
| (11541-0)   |   | (Month/D         | ay/Year)   | (Instr. 8)  |            |           | 0)                     | Owned   |                           | Ownership              |  |  |
|   |   |                  |            |   |            |           |                        | Following   | Indirect (I)              | (Instr. 4)             |  |  |
|   |   |                  |            |   |            | (A)       |                        | Reported<br>Transaction(s)                                    | (Instr. 4)                |                        |  |  |
|   |   |                  |            | Code V  | Amount     | or<br>(D) | Price                  | (Instr. 3 and 4)  |                           |                        |  |  |
|   |   |                  |            | Code v  | Amount     | (D)       | Flice                  |   |                           | By 401(k)              |  |  |
| Common  |   |                  |            |   |            |           |                        | 1,008 (1)   | Ι                         | Plan                   |  |  |
|   |   |                  |            |   |            |           | ¢                      |   |                           |                        |  |  |
| Common  | 07/27/2018                              |                  |            | А   | 786        | А         | ቅ<br>42 054            | 1,283,693   | D                         |                        |  |  |
|   |   |                  |            |   |            |           | 42.934                 |   |                           |                        |  |  |

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)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | nt of<br>lying                         | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--|---|---------------------|--------------------|--|--|---|--|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

Relationships

| <b>Reporting Owner Name / Address</b>    | Ktationsmps |           |            |       |  |  |  |  |
|--|-------------|-----------|------------|-------|--|--|--|--|
|  | Director    | 10% Owner | Officer    | Other |  |  |  |  |
| CONWAY JOHN W                            |             |           |            |       |  |  |  |  |
| ONE CROWN WAY                            |             |           |            |       |  |  |  |  |
| PHILADELPHIA, PA 19154                   |             |           |            |       |  |  |  |  |
| Signatures                               |             |           |            |       |  |  |  |  |
| Rosemary M. Haselroth, by Po<br>Attorney | wer of      |           | 07/30/2018 |       |  |  |  |  |
| **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).

(1) At June 29, 2018, the Reporting Person owned 1,008 shares of CCK Common Stock under the CCK 401(k) Plan.

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.