Edgar Filing: CROWN HOLDINGS INC - Form 4

CROWN HC Form 4	OLDINGS INC											
October 28, 2	2011											
FORM	14								OMB AP	PROVAL		
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE (Washington, D.C. 20549							NGE C	OMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to STATEMENT OF CHAN				GES IN I		ICIA	L OWN	ERSHIP OF	Expires: Estimated a			
Section 16. Form 4 or				SECUR	11165				burden hours per response 0.5			
Form 5 obligation may cont See Instru 1(b).	Filed pu ns Section 17	(a) of the l	Public U		ling Cor	npan	y Act of	Act of 1934, 1935 or Sectior)	·	0.5		
(Print or Type F	Responses)											
TURNER JIM L Symbol				r Name and			0	5. Relationship of Reporting Person(s) to Issuer				
CROW				N HOLDI			CKJ	(Check all applicable)				
(Mon				f Earliest Tr	ansaction			Discotor	100	0		
			10/27/2	•				Director Officer (give t below)	title 10% Owner below) Other (specify			
(Street) 4. If Am			4. If Ame	ndment, Da	te Origina	l		6. Individual or Joint/Group Filing(Check				
Filed(Mor PHILADELPHIA, PA 19154				nth/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)										
							-	iired, Disposed of,		-		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		n Date, if	3. Transactio Code (Instr. 8)	(Instr. 3,	spose 4 and (A) or	d of (D) 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)	Ownership		
				Code V		(D)	Price \$					
Common	10/27/2011			А	758	А	^ф 33.002	60,485	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 Derivativ Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (Instr.	ctio 8)	5. tionNumber of) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,				Amor Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code		4, an (A)	d 5) (D)	Date Exercisable	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 Pov Attorney	wer of	10/28/2011							
**Signature of Reporting Person	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.