Edgar Filing: CROWN HOLDINGS INC - Form 4

CROWN HC	OLDINGS INC										
Form 4											
April 28, 200									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or				SECUR	RITIES				Expires:January 3 200Estimated average burden hours per response0		
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the P	ublic U		ding Cor	npan	y Act of	e Act of 1934, 1935 or Section 0	I		
(Print or Type F	Responses)										
TURNER JIM L Symbol			r Name and N HOLD				5. Relationship of Reporting Person(s) to Issuer				
			f Earliest Tr	ansaction	-	-	(Check all applicable)				
(Month/			(Month/E 04/25/2	0ay/Year) 008				Director 10% Owner Officer (give title Other (specify below) below)			
			endment, Da hth/Day/Year	-	ıl		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
PHILADEL	PHIA, PA 19154							Form filed by M Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tabl	le I - Non-D	Derivative	Secu	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	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)	Ownership	
Common	04/25/2008			A	905	A	\$ 27.626	37,866	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)	Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne 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								
William T. Gallagher, by Powe Attorney	er of	of 04/28/2008						

**Signature of Reporting Person

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.