Edgar Filing: CROWN HOLDINGS INC - Form 4

CROWN HO Form 4	OLDINGS INC										
April 24, 200											
FORM	14 UNITED	STATES S		AITIES A			NGE C	OMMISSION	OMB AP OMB Number:	9ROVAL 3235-0287	
Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	6. Filed pur ns inue.	suant to Se a) of the Pu	CHAN ection 1 ablic Ut	GES IN I SECUR	BENEF ITIES e Securit ling Cor	ICIA ties E	Exchange y Act of	ERSHIP OF Act of 1934, 1935 or Section 0	Expires: Estimated a burden hour response		
(Print or Type F	Responses)										
TURNER JIM L Symbol			Symbol	Name and			-	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. Dat (Mont			3. Date of	Earliest Tra ay/Year)			,enj	(Check all applicable) Director 10% Owner Officer (give title Other (specify			
(Street) 4. If Ar			I. If Ame	ndment, Da hth/Day/Year)	-	1		below) below) 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 Rep	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution D any (Month/Day	Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose 4 and (A) or	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 Indirect Beneficial Ownership (Instr. 4)	
Common	04/24/2009			А	1,061	А	\$ 23.584	52,193	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. Transac Code (Instr. 8	etio 3)	5. tionNumber of) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,				Amou 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, and (A)	,	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	04)						
<u>**</u> Signature of Reporting Person		Date							

**Signature of Reporting Person

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.