FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Gifford Gerard H					2. Issuer Name and Ticker or Trading Symbol CROWN HOLDINGS INC [CCK]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title Other (specify						ner	
(Last) 770 TOV	(Fir VNSHIP LI	,	Middle	e)	3. Date of Earliest Transaction (Month/Day/Year) 01/07/2022									X Officer (give title Other (specify below) EVP & COO							
(Street) YARDLI (City)			.9067 Zip)	7	4. If a	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Ye	ear) if	2A. Deemed Execution Date, if any (Month/Day/Year)		Ti	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			Beneficially Owned Following		s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								С	ode	v	Amount	(A) or (D)	Price	Tra	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Common 01/			01/07/202	.2				A		12,027(1)	A	\$0		126,	6,152		D			
Common	Common			01/07/202	22				F		11,348(2)	D	\$109.5	54	114,804		D				
Common	mon 01/10/20			01/10/202	2			F		1,970(2)	D	\$108.8	35	112,834		D					
Common															5,426		I		By 401(k)Plan		
	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)	Exec if an	Deemed sution Date, y tth/Day/Year)	4. Transa Code 8)	action (Instr.	5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 and 5)	tive ties ed ed	Exp	iration nth/Day		3 and	int of rities rlying ative rity (Instr.	t		9. Numb derivativ Securitie Benefici Owned Followin Reporter Transact (Instr. 4)	re es ally g d tion(s)	10. Ownersl Form: Direct (I or Indire (I) (Instr.	hip () ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(Instr. 3 and 5)			e rcisable		Title	or Number	_							

Explanation of Responses:

1. Represents additional performance-based shares of Restricted Common Stock that vested on January 7, 2022 whose grant was originally reported on a Form 4 filed with the Securities and Exchange Commission on January 9, 2019 (the "Original Form 4"). As reported on the Original Form 4, such performance-based shares were originally granted to the Reporting Person based on the Company's Total Shareholder Return versus a defined group of companies with the final number of performance-based shares varying from 0 to 200% of 12,027.

2. Represents shares transferred to the Company for tax withholding in connection with vesting of restricted stock.

/s/ Rosemary Haselroth, by Power of Attorney

01/11/2022

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

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 Number.