| SEC Form 4 | |
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Instruction 1(b).

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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| OMB Number: | 3235-0287 | | | | | | | | |
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| Estimated average burden | | | | | | | | | |
| hours per response | . 0.5 | | | | | | | | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 [*] HAGGE STEPHEN J | | | | | | me and Tick | | | Symbol C [CCK] | | Relationshi heck all app X Direc | , | | | | |
|---|--|--|----------|-----------|-----------------|--------------------|-----------|--------------------------------------|--|---|--|-----------------|--|---|---|------------|
| (Last) | 3. Date of Earliest Transaction (Month/Dav/Year) | | | | | | | | | | | | er (give title | | (specify | |
| (Street) YARDL | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) | (Si | ate) | (Zip) | | | | | | | | | | Perso | on | | |
| | | Table | el-No | on-Deriva | ative S | Secur | ities Acq | luired | , Dis | posed of | , or Be | neficia | ally Own | ed | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution Date, | | | iction Instr. | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | Benefi Owned | ties cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code | v | Amount (A) or (D) Pri | | Price | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) |
| Common 07/29/2 | | | | | .022 | | | A | | 413 | A | \$96.8 | 68 4 | 1,496 | D | |
| | | Та | ble II · | | | | - | - | | osed of, o convertib | | | - | d | | |
| 1. Title of | 2. | 3. Transaction | 3A. De | emed | 4. 5. Number | | | 6. Date Exercisable and 7. Title and | | | | 8. Price of | 9. Number of | of 10. | 11. Nature | |

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | | | Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|-----|-----|---------------------|--------------------|---|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | |

Explanation of Responses:

<u>/s/ Rosemary Haselroth, by</u> <u>Power of Attorney</u>

07/29/2022

** 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.