## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	S IN BENEFI	CIAL OW	<b>NERSHIP</b>

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average	e burden							

0.5

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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).

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

Name and Address of Reporting Person*					2. Issuer Name <b>and</b> Ticker or Trading Symbol CROWN HOLDINGS INC [ CCK ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Lee Rose</u>						CROWN HOLDINGS INC [ CCR ]									X Director		tor 10		10% C	wner
(Last) (First) (Middle) ONE CROWN WAY				3. Date of Earliest Transaction (Month/Day/Year) 07/27/2018										Office	er (give title v)		Other (specify below)			
(Street)				_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
PHILADELPHIA PA 19154			_										X	Form	Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(St	ate) (	Zip)													. 0.0				
		Tabl	e I - No	n-Deriv	/ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or E	3en	eficia	ally C	)wne	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4)			(A) or 3, 4 an	and 5)   Secur Benef		cially I Following	6. Owners Form: Dir (D) or Ind (I) (Instr.	rect lirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							Code	v	Amount	ount (A) or Pri		Price	I	Transaction(s) (Instr. 3 and 4)				(1130.4)		
Common 07/27				//2018	2018		A		786 A		4	\$42.9	954	4,784		D				
		Та						•			sed of, onvertib			-	y Ow	ned				
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		4. Transa Code ( 8)		5. Nu of Deriv Secu Acqu (A) on Dispo of (D) (Instrand 5	6. Date Expiration (Month/E	on Dat			ount	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Explanation of Responses:

Rosemary M. Haselroth, by Power of Attorney

07/30/2018

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.