FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ashington, D.C. 20549	
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OMB APF	PROVAL								
OMB Number:	3235-0287								
Estimated average burden									
hours por rospons	0. 0.5								

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* Owens B Craig				2. Issuer Name and Ticker or Trading Symbol CROWN HOLDINGS INC [CCK]							5. Relationship of Reportir (Check all applicable) X Director			ng Person(s) to Issuer 10% Owner					
(Last)	(Fir	est) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/01/2023										Officer (give title below)			Other (s below)	specify
HIDDEN RIVER CORPORATE CENTER TWO 14025 RIVEREDGE DRIVE, SUITE 300			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														X Form filed by One Reporting Person Form filed by More than One Reporting Person					
TAMPA	FL	3	3637		Rul	Rule 10b5-1(c) Transaction Indication													
(City)	(Sta	ate) (Z	Zip)		Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Ins							uant to a See Inst	o a contract, instruction or written plan that is intended to nstruction 10.						
		Table	I - Nor	า-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or Be	enefic	ially	Own	ed			
Date			2. Transact Date (Month/Day	Exec ay/Year) if any		A. Deemed kecution Date, any lonth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired Disposed Of (D) (Instr. 5)			3, 4 and See Be		Securities For Beneficially (D) Owned Following (I)		Direct of ndirect of r. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price	•	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common				11/01/2	:023				A		499	A	\$80).18	7	,055	Ι)	
Common														2	,000	1		The B Craig Owens Rev Trust U/A 1/25/08, B Craig Owens Trustee	
		Tal									osed of, o				Owne	t			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deel Execution if any (Month/I		4. Transa Code (I 8)		5. Number tion of		6. Date Exerc Expiration Da (Month/Day/Y		te ear)	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Di or (I)	wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V (A) (D)			Date Expiration Date			of Shares								

Explanation of Responses:

/s/ Rosemary Haselroth, by **Power of Attorney**

11/01/2023

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).