FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DС	20549
rvasiliigion,	D.C.	20040

STATEMENT (OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response	: 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* Sweitzer Caesar F					2. Issuer Name and Ticker or Trading Symbol CROWN HOLDINGS, INC. [CCK]									tionship of Reporting all applicable) Director		ng Per	rson(s) to Is		
(Last)	(Fir	rst) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/14/2024									Office	er (give title v)		Other (s below)	specify	
HIDDEN RIVER CORPORATE CENTER TWO 14025 RIVEREDGE DRIVE, SUITE 300					4. If <i>I</i>	Amend	ment,	Date o	of Origin	al File	d (Month/Da	y/Year)		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) TAMPA	FL	3	3637			Form filed by More than One Reporting Person									orting				
(City)	(St	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									nded to					
		Table	I - No	n-Deriva	tive S	Secui	rities	Acc	uired	, Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution D		ution Date,				s Acquired (A) of (D) (Instr. 3, 4		4 and Secur Benef Owne		cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	nount (A) or P			Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common				02/14/2	024		A		536	A	\$74.	642	21,058			D			
		Tal	ble II ·								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)	Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) oi Dispo of (D) (Instr and 5	rities lired r osed)	6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec (Ins	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

/s/ Rosemary Haselroth, by Power of Attorney

** Signature of Reporting Person Date

02/16/2024

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.

^{*} 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).