FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APF	PROVAL
	OMB Number:	3235-0287
1	Estimated average	hurden

0.5

hours per response:

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* <u>SULLIVAN JAMES M</u>				2. Issuer Name and Ticker or Trading Symbol SEALED AIR CORP/DE [SEE]						neck all ap	olicable)	g Person(s) to Is	wner		
(Last) (First) (Middle) SEALED AIR CORPORATION 2415 CASCADE POINTE BLVD				3. Date of Earliest Transaction (Month/Day/Year) 03/05/2020						X Officer (give title Other (specify below) Senior VP & CFO					
(Street) CHARL(_	28208 (Zip)		4. If Am	endment, Date of	Original	Filed	(Month/Day	/Year)	6. I Lin	e) <mark>X</mark> Forr	n filed by One n filed by Moi	o Filing (Check A e Reporting Pers re than One Rep	on
		Tab	le I - Non	n-Deriv	ative Se	curities Acq	uired,	Disp	osed of,	or Ben	eficia	lly Own	ed		
1. Title of Security (Instr. 3) 2. Transc Date (Month/E				Execution Date,		Transaction Dispo			urities Acquired (A) sed Of (D) (Instr. 3, 4		and Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
1. Title of S	security (ms	r. 3)				if any	Transa Code (I		l ·	Of (D) (Instr.	3, 4 and	d Secur Benef Owne	ities icially d Following	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership
1. Title of S	ecunty (insi	r. 3)		Date		if any	Transa Code (I		l ·	(A) or (D)	3, 4 and	Secur Benef Owne Repor Trans	ities icially d Following	Form: Direct (D) or Indirect	of Indirect Beneficial
Common		r. 3)		Date (Month/E		if any	Transa Code (I 8)	nstr.	5)	(A) or		d Secur Benef Owne Repor Transa (Instr.	ities icially d Following ted action(s)	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership
		·		Date (Month/E	Day/Year)	if any	Transa Code (I 8) Code	v spo:	Amount 5,000 sed of, o	(A) or (D) A r Benefi	Price \$29.	Secur Benef Owner Repor Transs (Instr.	tities icially d Following ted action(s) 3 and 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership

Explanation of Responses:

Price of Derivative

Security

/s/ Youhao Dong, attorney-infact for Mr. Sullivan

Amount Number

of Shares

Underlying Derivative

and 4)

Title

Security (Instr. 3

03/05/2020

Direct (D) or Indirect (I) (Instr. 4)

Ownership (Instr. 4)

** Signature of Reporting Person

Beneficially Owned

Following

Reported Transaction(s) (Instr. 4)

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).

Code

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.

Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)

(A) (D) Date Exercisable

Expiration

Date