FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasimigton,	D.O.	200-0

washington, D.C. 20549	
STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
-	Estimated average	hurden								

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* Ahmad Zubaid				2. Issuer Name <b>and</b> Ticker or Trading Symbol SEALED AIR CORP/DE [ SEE ]						(Cl	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
2 minde	<u>Labura</u>				-							_	X Direct	or		10% Ov	vner		
(Last)	(F	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/18/2023									Office below	r (give title )		Other (s below)	specify
C/O SEALED AIR CORPORATION			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6.1	6. Individual or Joint/Group Filing (Check Applicable								
2415 CA	SCADE P	OINTE BLVD			" "	4. If Americanem, Date of Original Fried (Month Day) Tear)							Line)				50.000.0		
					,									X Form filed by One Reporting Person				on	
(Street)															Form Perso		re tha	n One Repo	orting
CHARL	OTTE N	IC :	28208		-										F 6130	11			
,					Rul	le 1	10b5-	-1(c	) Trans	sact	ion In	dicat	ion						
(City)	(5	State)	(Zip)			oh o o	l, thia ha	, to inc	dianta that a	trono					ntroot inctru			that is intone	lad to
						satisf	y the affir	rmative	e defense c	onditio	ns of Rule	10b5-1	ursuari (c). See	e Instruc	tion 10.	ction or writte	n pian	that is intend	ied to
		T. I. I	- 1 1	<b>D</b>	- 4			- 4 -		<u> </u>			<u> </u>			-1			
		Tabi	e I - Non	i-Deriva	ative :	Sec	uritie	S AC	quirea,	DIS	posea	οτ, or	Ben	етісіа	lly Owne	ea			
1. Title of	Security (In	str. 3)		2. Transa Date	ection	ction 2A. Deemed Execution Da			3. Transaction			4. Securities Acquired (A Disposed Of (D) (Instr. 3,							7. Nature of Indirect
(Month/Da					ay/Year	ay/Year) if any			Code (Instr. 5)		eu Oi (D) (iiisii. 3,		o, - u	Benefic	ially (D)		or Indirect   E	Beneficial Ownership	
				1,,,	(Month/Day/Yea		1)   0)	_	1	I 1		Т	Reporte	ed " ''	""		(Instr. 4)		
								Code	۱v	Amoun	t	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				
Common Stock												1	1,200		D				
		Ta	able II - I	Derivat	ive Se	ecu	rities	Aca	uired. C	ispo	sed of	f. or E	Benef	ficiall	y Owned				
		-							, option						,				
1. Title of 2. 3. Transaction 3A. Deemed							5. Number 6. Date Exercisabl						8. Price of	9. Number of		10.	11. Nature		
				Transaction Code (Instr.				Expiration Date (Month/Day/Year)			Amount of Securities			Derivative Security	derivative Securities		Form: Benefic	Beneficial	
(Instr. 3)	Price of Derivative		(Month/Da	ay/Year)	8)	Securities Underlying Acquired Derivative Sec					ecurity	(Instr. 5)	Beneficially Owned Following		Ownership				
	Security					(A) or (Instr. 3 and 4)										(111541.4)			
						Disposed of (D)								Reported Transaction(s)					
							(Instr. 3, 4 and 5)						(Instr. 4)						
				ı				Am		mount									
													O N	r umber					
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	l o						
Stock		<del> </del>		-		Ė		(-,		+		Comm				-			
Units	(1)	05/18/2023			A		6,402	Ιl	(2)		(2)	Stoc		5,402	(3)	17,677 <sup>(</sup>	4)	D	1

## **Explanation of Responses:**

- 1. 1-for-1
- 2. The units are to be settled in shares of Sealed Air Common Stock (with certain exceptions specified in the Corporation's Deferred Compensation Plan for Directors) following the reporting person's retirement from the Board of Directors.
- 3. Award made under the 2014 Omnibus Incentive Plan.
- ${\bf 4.} \ Reflects \ the \ addition \ of \ units \ converted \ from \ dividend \ equivalents.$

/s/ Caroline Thomas, attorney-

in-fact for Mr. Ahmad \*\* 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.