FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

0.5

hours per response:

| | Check this box if no longer subject to |
|--------|--|
| \neg | 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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | | | | | OI : | Section |) (II) OC III | oi tile i | invesiment | COII | ірапу Асі | 01 1940 | | | | | | | |
|--|----------|--|--|---------|---|---------|-------------------------------------|-----------|--|------|------------------|--|---|-------------|---|--|----------|--|--|
| 1. Name and Address of Reporting Person* KOSECOFF JACQUELINE B | | | | | 2. Issuer Name and Ticker or Trading Symbol SEALED AIR CORP/DE [SEE] | | | | | | | (Ch | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| ICOULC | 3011 371 | СОСПИ | <u>D</u> | | | | | | | | | | | | X Direct | or | | 10% Ov | vner |
| (Last) (First) (Middle) C/O SEALED AIR CORPORATION | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/22/2014 | | | | | | | 1 | Office below | (give title | | Other (s below) | specify | | |
| | | | N | | | | | | | | | | | | | | | | |
| 200 RIV | ERFRONT | BOULEVARD | | | - | | | | | | | | | | | | | | |
| | | | | | 4. 11 | f Ame | ndment, | Date o | of Original F | iled | (Month/D | ay/Year |) | 6. li | | Joint/Group | o Filing | (Check Ap | plicable |
| (Street) | NOD. | | | | | | | | | | | | | - 1 | • | filed by One | e Repo | orting Perso | n |
| ELMWC PARK | N. | J | 07407 | | | | | | | | | | | | | filed by Mo | | One Repo | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| | | Tab | le I - Non | n-Deriv | ative | Se | curitie | s Acc | quired, [| Disp | osed o | of, or I | Bene | eficial | ly Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | Execution Date, | | Transaction Dispose Code (Instr. 5) | | rities Acquired (A) ed Of (D) (Instr. 3, 4 | | | Benefic | es ially Following | Form | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amount | (A (D | () or () | Price | Transac (Instr. 3 | tion(s) | | | (Instr. 4) |
| Common Stock | | | | | | | | | | | | 26,437 | | | ,437 | | | By Trust ⁽¹⁾ | |
| | | Т | able II - I | | | | | | uired, Di , options | | | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security | | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | Code (Inst | | | | 6. Date Exercisal Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | | Date Exercisable | | xpiration ate | Title | O N O | umber | | | | | |
| Stock Units | (2) | 05/22/2014 | | | Α | | 5,693 | | (3) | | (3) | Commo | | 5,693 | (4) | 8,015 | | D | |

Explanation of Responses:

- 1. Shares previously held directly are now held indirectly in a trust for the benefit of Dr. Kosecoff and her husband. Dr. Kosecoff disclaims beneficial ownership of the shares held in this trust except to the extent of her pecuniary interest therein.
- 2. 1-for-
- 3. 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.
- 4. Award made under the 2014 Omnibus Incentive Plan.

Jacqueline B. Kosecoff 05/23/2014

** 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.