Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

OMB APPROVAL										
OMB Number: 3235-0287										
Estimated average burden										
hours per response: 0										

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1. Name and Address of Reporting Person* Doheny Edward L II					2. Issuer Name and Ticker or Trading Symbol SEALED AIR CORP/DE [SEE]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
<u>Donen</u>	<u>y Edwar</u>	<u>a L 11</u>				SETTED THE COLUMN								X	Direc	tor		10% O	wner	
(Last)	(1	First)	(N/	liddle)		2. Data of Earlight Transaction (Month/Dov/Mont)								X	Officer (give title below)			Other (: below)	specify	
l ` ′	`	R CORPOF	,	,		3. Date of Earliest Transaction (Month/Day/Year) 03/10/2023								President and CEO						
l .		POINTE B																		
	ISC/IDE I	OIIVILD	OOLL			4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind	5. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)	Form filed by One Beneriting Benerit					
CHARL	OTTE N	IC	28	3208											X	Form filed by One Reporting Person Form filed by More than One Reporting				
																Pers		ne mai	п Опе кер	orang
(City)	(:	State)	(Z	ip)																
			Table	I - No	n-Deriva	tive S	Secu	rities	s Acq	juired	, Dis	posed of	, or Be	enef	iciall	y Own	ed			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Execution Date,		3. 4. Secu Transaction Dispose Code (Instr. 8)		Disposed C	ties Acquired (A) I Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Pr	ice		ea ction(s) 3 and 4)			(Instr. 4)		
Common	Stock				03/10/2	2023	023		A		32,330	A		(1)	680,203			D		
Common	Stock				03/10/2	023			F		31,843	D	\$	45.27	648,360			D		
																				401(k)
																				and
Common Stock															2,	200 ⁽²⁾			Profit-	
																				Sharing Plan
			Tob	Ja II	Dowingsti			tioo	Λ	المماا	Dian	acad of	or Dor		ن داله د	0		<u> </u>		
			Idu	ne II -								osed of, convertib				Owne	u			
1. Title of Derivative Security (Instr. 3) 1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date Execution Date, if any (Month/Day/Year)				ion Date,	4. Transaction Code (Instr. 8) S. Numbe of Derivative Securitie Acquired (A) or Disposec of (D) (Instr. 3, and 5)		vative urities uired or losed o) cr. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		tr.	rivative d curity S str. 5) E F	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	ly G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date		Amou or Numb of Share	er							

Explanation of Responses:

- 1. Award made under the Stock Leverage Opportunity feature of the Sealed Air Corporation Annual Incentive Plan.
- $2. \ Reflects \ unit/share \ adjustments \ to \ the \ reporting \ person's \ holdings \ under \ the \ Sealed \ Air \ Corporation \ 401(k) \ and \ Profit-Sharing \ Plan, \ a \ tax \ conditioned \ plan.$

/s/ Caroline Thomas, attorney 03/14/2023 in fact for Mr. Doheny

** 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.