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
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

	tion 1(b).	nue. See		Filed							ies Exchang mpany Act o		.934			nours	per re	esponse:	0.5
Name and Address of Reporting Person* Willis Angel S					2. Issuer Name and Ticker or Trading Symbol SEALED AIR CORP/DE [SEE]								Check a	all app Direc	licable) tor	r		wner	
(Last) (First) (Middle) C/O SEALED AIR CORPORATION 2415 CASCADE POINTE BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 02/10/2022 4. If Amendment, Date of Original Filed (Month/Day/Year)								X Officer (give title below) Other below V. Pres., Gen. Counsel & Se					:'y
(Street)			8208		4. If Amendment, Date of Original Filed (Month/Day/Yea							y/ reary		Individual or Joint/Group Filing (Check Applical Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St		Zip) 	n-Deriva	tive S	Secu	rities	s Acq	uired	Dis	posed of	, or Be	nefici	ially (Own	ed			
1. Title of Security (Instr. 3) 2. T Dat			2. Transac	2. Transaction Date (Month/Day/Year)		n 2A. Deemed Execution Date,		3. Transaction Code (Instr. 5) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			d (A) or	5. Amount of		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price	1	Transa	saction(s) r. 3 and 4)			(Instr. 4)		
Common	Common Stock 02/10/			02/10/2	022		F		577	D	\$64.	.38 18,125		3,125		D			
Common Stock														9	945		I	401(k) & Profit- Sharing Plan	
		Tal									osed of, convertib				wne	t			
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year)				on Date,	4. Transaction Code (Instr. 8)		of Deri Secu Acq (A) o Disp of (E	osed 0) tr. 3, 4	6. Date Expirat (Month	ion Da			of es ng /e	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	O N O	umber							

Explanation of Responses:

/s/ Sonja Burgess, attorney-in-02/11/2022 fact for Ms. Willis

** Signature of Reporting Person

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.