### Edgar Filing: WHITE H KATHERINE - Form 4

WHITE H K. Form 4	ATHERINE										
March 15, 20	013										
FORM	$ 4 _{\text{UNITED}}$	тлтгс	SECUE	TTIFS A	ND FY	∼цл	NCF C	OMMISSION		PROVAL	
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								OMB Number:	3235-0287		
Check thi if no long	or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									
subject to Section 10 Form 4 or	<b>51A1E</b> M 6.										
Form 5 obligatior may conti <i>See</i> Instru 1(b).	$\frac{18}{1000}$ Section 17(a	a) of the l	Public Ut		ling Con	ipan	y Act of	e Act of 1934, 1935 or Section 0	n		
(Print or Type R	Responses)										
WHITE H KATHERINE Syn			Symbol	Name and			-	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(Last) (First) (Middle) 3. Date of Earliest Transaction					(Check all applicable)					
(Mor				Month/Day/Year) )3/13/2013				Director 10% Owner X Officer (give title Other (specify below) below)			
	NT BOULEVAR	RD.						V. Pres., O	Gen. Counsel, S	Sec'y	
				endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
ELMWOOD	D PARK, NJ 0740	)7						Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deem (Month/Day/Year) Execution any (Month/Da		n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	03/13/2013			F	683	D	\$ 23.32	203,783	D		
Common Stock	03/13/2013			А	3,160	А	<u>(1)</u>	206,943	D		
Common Stock								15,165 <u>(2)</u>	Ι	By Profit Sharing Plan	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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#### required to respond unless the form displays a currently valid OMB control number.

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactic	onNumber	Expiration D	ate	Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	2		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. :	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(
					(insu: 5, 4, and 5)						
					-, and 3)						
									Amount		
						D	<b>F</b> · · ·		or		
						Date	Expiration		Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
				Coue v	$(\mathbf{T})$ $(\mathbf{D})$				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
FB	Director	10% Owner	Officer	Other			
WHITE H KATHERINE C/O SEALED AIR CORPORATION 200 RIVERFRONT BOULEVARD ELMWOOD PARK, NJ 07407			V. Pres., Gen. Counsel, Sec'y				

# Signatures

H. Katherine 03/15/2013 White

\*\*Signature of Reporting Person

Date

### **Explanation of Responses:**

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.