BALL CORP Form 4/A September 12, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL OMB

3235-0287 Number: January 31,

Expires: 2005 Estimated average

0.5

burden hours per response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

See Instruction

may continue. 30(h) of the Investment Company Act of 1940 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * STRAIN ROBERT D

(Street)

(Ctata)

2. Issuer Name and Ticker or Trading Symbol

Issuer

below)

5. Relationship of Reporting Person(s) to

(Check all applicable)

BALL CORP [BLL]

(First) (Middle) 3. Date of Earliest Transaction (Last)

(Month/Day/Year)

Director 10% Owner X_ Officer (give title) _ Other (specify

BALL CORPORATION, 10 LONGS 08/16/2016

PEAK DRIVE

4. If Amendment, Date Original

Filed(Month/Day/Year) 08/17/2016

Sr. VP BallCorp & Pres. BATC 6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

BROOMFIELD, CO 80021

(City)	(State)	Table Table	e I - Non-D	erivative S	Securi	ties Acqu	ired, Disposed of	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year)		3. Transactio Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	08/16/2016		Code V M(1)	Amount 14,600	or (D)	Price \$ 45.93	Transaction(s) (Instr. 3 and 4) 20,945.83	D	
Common Stock	08/16/2016		D(2)	8,352 (3)	D	\$ 80.29	12,593.83	D	
Common Stock							782.4639	I	401(k) (4)

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)required to respond unless the form displays a currently valid OMB control

Edgar Filing: BALL CORP - Form 4/A

number.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number of tionDerivative Securities) Acquired (A) or Disposed of (D) (Instr. 3, 4,		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	and 5	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Stock Appreciation Rights (sars)	\$ 45.93	08/16/2016		M <u>(1)</u>		14,600	01/30/2023	01/30/2023	Common Stock	14,6

Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
STRAIN ROBERT D			C VID					
BALL CORPORATION			Sr. VP					
10 LONGS PEAK DRIVE			BallCorp &					
			Pres. BATC					
BROOMFIELD, CO 80021								

Signatures

/s/ Janice L. Rodriguez, attorney-in-fact for Mr. 09/12/2016

**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) Exercise of Stock Appreciate Rights (SARS)
- (2) Shares utilized to pay for the cost of the SARS and for the payment of the tax obligation on the exercise of the SARS.
- (3) Amendment correcting the number of shares that were reported as 8532 and should have been 8352.
- (4) Total number of 401(k) Plan shares acquired through periodic dividend reinvestment, participant's contributions and employer matching contributions.

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.

Reporting Owners 2