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

Washington, D.C. 20549

| | OIVIL |
|--|--------------|
| STATEMENT OF CHANGES IN DENCERTAL CONNERSHIP | OMB Numbe |
| | Ectimoted of |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| r | | | | | | | | | | | | |
|---|--------------------------|-----|--|--|--|--|--|--|--|--|--|--|
| | OMB APPROVAL | | | | | | | | | | | |
| | OMB Number: 3235-028 | | | | | | | | | | | |
| l | Estimated average burden | | | | | | | | | | | |
| l | hours per response: | 0.5 | | | | | | | | | | |

| Name and Address of Reporting Person* Hassfurther Thomas A | | | | | | 2. Issuer Name and Ticker or Trading Symbol PACKAGING CORP OF AMERICA PKG | | | | | | | | 5. Relationship of Reporting Perso (Check all applicable) Director X Officer (give title | | | | , L0% C Other | wner (specify |
|--|--|--|------------------------------|-------------------------------|--|--|---------------|---------------------------------|--|---|---|---------------|---|--|---|--|---|---------------------|----------------------|
| (Last) (First) (Middle) 1955 WEST FIELD COURT | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/24/2012 | | | | | | | | below) below) Exec. VP | | | | | |
| (Street) LAKE FOREST IL 60045 | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | on | 2A. Deemed Execution Date, | | 3. Transaction Code (Instr. | | 4. Securities Disposed Of | d (A) or | | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | (msu. 4) |
| Common Stock 07/24/20 | | | | | 012 | 12 | | | S | | 9,360 | D | \$30.00 | 008(1) | 2 | 83,027 | D | | |
| Common Stock | | | | | | | | | | | | | | | | 7,876 | I | | by 401(k) plan |
| Common Stock | | | | | | | | | | | | | | | 2 | 25,349 | I | | By Spouse |
| | 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) | vative irity or Exercise Price of Derivative Security Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) | | 4. Transa Code (8) | | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expir (Mon | te Exer ration D tth/Day/ | Securities Underlying Derivative Security (Instr. : and 4) | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owne Form: Direct or Ind (I) (Ins | (D) irect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

1. The price listed is the weighted average sale price. The actual sales prices for these shares ranged between \$29.83 and \$30.27. The reporting person undertakes to provide full information regarding the number of shares sold at each separate price upon request.

Remarks:

Kent A. Pflederer, attorney in

07/25/2012

** 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.