| SEC Form 4 | |
|------------|--|
|------------|--|

 \square

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

|) | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b). |
|---|---|
| | Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPRC | VAL |
|-------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burde | en |
| hours per response: | 0.5 |

| 1. Name and Address of Reporting Ferson | | | 2. Issuer Name and Ticker or Trading Symbol <u>PACKAGING CORP OF AMERICA</u> [PKG | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|--|--------------|--|---|-------------------------------------|-----------------------|--|--|--|
| KOWLZAN MARK W | | | | X | Director | 10% Owner | | | |
| (I = =+) (5 | Tinet | (6.4:-1-11-) | 1 | x | Officer (give title below) | Other (specify below) | | | |
| | (Last) (First) (Middle) 1900 WEST FIELD COURT | | 3. Date of Earliest Transaction (Month/Day/Year) 06/28/2010 | | CEO Elect | Delow) | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | idual or Joint/Group Filing (| Check Applicable | | | |
| LAKE FOREST | L | 60045 | | X | Form filed by One Reporti | ing Person | | | |
| | | | | | Form filed by More than C Person | One Reporting | | | |
| (City) (S | State) | (Zip) | | | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | | 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) | |
|---------------------------------|--|---|------------------------------|---|--------|---------------|---|---|---|----------------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130. 4) |
| Common Stock | 06/28/2010 | | Α | | 70,000 | A | \$0.00 ⁽¹⁾ | 244,713 | D | |
| Common Stock | | | | | | | | 5,865 | Ι | by 401(k) plan |

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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | 5. Number of Derivative Securities | | | Date Amount of y/Year) Securities Underlying | | mount of Derivative ecurities Security | | derivative C Securities F | Ownership Form: | 11. Nature of Indirect Beneficial Ownership |
|---|---|--|---|------------------------------|---|--|-----|---------------------|--|--|---|--|--|-------------------------------|--|
| | Derivative Security | | | | | Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | Derivative Security (Instr. 3 and 4) | | | Owned Following Reported Transaction(s) (Instr. 4) | or Indirect (I) (Instr. 4) | (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Award of restricted stock

Remarks:

Kent A. Pflederer, attorney in fact

<u>06/29/2010</u>

** 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.