SEC Form 4

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

Check to Sec obligat Instruc	IT OF CHANGES IN BENEFICIAL OWNERSHIP OMB Number: 3235-028: Estimated average burden Estimated average burden I pursuant to Section 16(a) of the Securities Exchange Act of 1934 hours per response: 0.5 or Section 30(h) of the Investment Company Act of 1940 0.5																	
1. Name and Address of Reporting Person [*] Schneider Robert Andrew					2. Issuer Name and Ticker or Trading Symbol <u>PACKAGING CORP OF AMERICA</u> [PKG]								Check all a Dir	hip of Report pplicable) ector icer (give title	Ū	erson(s) to Is 10% Ov Other (s	wner	
(Last) 1 N. FIE		(First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/22/2020								SVP & CIO					
(Street) LAKE FOREST IL 60045 (City) (State) (Zip)					4. lf /	4. If Amendment, Date of Original Filed (Month/Day/Year)								ine) X Fo Fo	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Table	I - No	n-Deriva	tive s	Secu	rities	Acq	uired,	Dis	posed of	, or Be	enefic	ially Ov	ned			
1. Title of Security (Instr. 3) Date (Month/Date)			Execution D		Date,	Code (Instr.					nd Secu Ben Owr	nount of Irities eficially ed Following orted	For (D)	m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Tran	action(s) . 3 and 4)			(Instr. 4)
Common Stock 06/22/				06/22/2	2020			F		1,222	D	\$ <mark>98</mark>	.57	7 47,024		D		
Common Stock													1,799			By 401k Plan		
		Ta	ble II -								osed of, onvertib				ed			
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any		ion Date,	8)		of Deriv	r osed) 1. 3, 4	6. Date Expirat (Month) Date Exercis	ion Da /Day/Y	Year) Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of		t of ies ive y (Instr.) Amount or Number	8. Price of Derivative Security (Instr. 5) Beneficie Owned Followim Reported Transact (Instr. 4)		e s Illy g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

Remarks:

Kent A. Pflederer, attorney in 06/23/2020 fact

** 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.

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