## Edgar Filing: SILGAN HOLDINGS INC - Form 4

	OLDINGS INC											
Form 4 March 03, 20	017											
FORM										PPROVAL		
		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMB Number:	3235-0287				
Check th if no long subject to Section 1 Form 4 c Form 5 obligatio may com See Instr 1(b).	ger 5 16. 5 5 5 5 5 5 5 5 5 5 5 5 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 20(b) of the Investment Company Act of 1040								Expires:January 31, 2005Estimated average burden hours per response0.5		
(Print or Type ]	Responses)											
1. Name and Address of Reporting Person <u>*</u> Ulmer Kimberly Irene			2. Issuer Name <b>and</b> Ticker or Trading Symbol SILGAN HOLDINGS INC [SLGN]					5. Relationship of Reporting Person(s) to Issuer				
	<sup>(First)</sup> OLDINGS INC RK SQUARE -		3. Date of (Month/D 03/01/20	-	ansaction			Director X Officer (give below)		• Owner er (specify		
100	(Street)				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
STAMFOR	D, CT 06901								Nore than One Re			
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	ity (Month/Day/Year) Execution Date, i		on Date, if	Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A)			d of	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	03/01/2017			Code V F	Amount 1,051	or (D) D	Price \$ 60.6	(Instr. 3 and 4) 16,691	D			
Common Stock	03/01/2017			А	2,200	А	<u>(1)</u>	18,891 <u>(2)</u>	D			

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

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 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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Addre	ess	Relationships						
	Director	10% Owner	Officer	Other				
Ulmer Kimberly Irene SILGAN HOLDINGS INC. 4 LANDMARK SQUARE - SUIT STAMFORD, CT 06901	ГЕ 400		Vice President and Controller					
Signatures								
/s/ Kimberly Irene 03. Ulmer 03.	/03/2017							

**Explanation of Responses:** 

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

These securities are restricted stock units that were granted on March 1, 2017 under the Silgan Holdings Inc. Amended and Restated 2004
(1) Stock Incentive Plan. These restricted stock units vest ratably over a 5 year period beginning on March 1, 2018 and will be settled in shares of Common Stock on a 1-for-1 basis upon vesting.

This amount includes 8,720 restricted stock units that are not yet vested that have been granted under the Silgan Holdings Inc. Amended
 (2) and Restated 2004 Stock Incentive Plan. Upon vesting, these restricted stock units will be settled in shares of Common Stock on a 1-for-1 basis.

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.

\*\*Signature of Reporting

Person