FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	ide. See		Filed							rities Exchang		of 1934			nours	per re	esponse:	0.5
Name and Address of Reporting Person* Pflederer Kent A.						2. Issuer Name and Ticker or Trading Symbol PACKAGING CORP OF AMERICA PKG									all app Direc	onship of Reportin applicable) Director Officer (give title		rson(s) to Is 10% Ov	wner
(Last) (First) (Middle) PACKAGING CORPORATION OF AMERICA						3. Date of Earliest Transaction (Month/Day/Year) 10/30/2023								X	below	<i>(</i>)	VP	below)	specily
1 N. FIELD CT.					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								ne)	Individual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person				
(Street) LAKE FOREST IL 60045															Form filed by More than One Reporting Person				
(City)	$ _{\Box}$	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																	
		Table	I - N	Non-Deriva	tive S	Secui	rities	Ac	quir	ed, Di	sposed o	f, or E	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					Execution		on Date,		3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (and 5) Secu Bene Own		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(111501. 4)
Common	nmon Stock 10/30/20			10/30/202	!3			S		4,000	D	\$150.9)327 54,		4,447		D		
Common Stock													4,103		I	through 401(k) plan			
		Tal	ble I	I - Derivati (e.g., pu							posed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date Execution Date, if any (Month/Day/Year)					Transaction Code (Instr. 8)		vative rities pired r osed) r. 3, 4	Exp (Mo	Expiration Date (Month/Day/Year)			e and unt of rities rlying ative rity (Instr. 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisable	Expiration Date	Title	or Number of Shares						

Explanation of Responses:

Remarks:

Kent A. Pflederer

10/31/2023

** 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.