FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0104							
Estimated average burden								
hours per response:	0.5							

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

Name and Address of Reporting Person* Campbell David D			Date of Event Requiring latement (Month/Day/Year) 2/17/2012 3. Issuer Name and Ticker or Trading Symbol GRAPHIC PACKAGING HOLDING CO [GPK]								
(Last) 814 LIVINGST (Street) MARIETTA (City)	(First) ON COURT GA (State)	(Middle) 30067 (Zip)	02/1//2012			ionship of Reporting Person(s all applicable) Director Officer (give title below)) to Issuer 10% Owner Other (speci below)	fy (Mo	onth/Day/Year) ndividual or Joint/ blicable Line) X Form filed by	te of Original Filed Group Filing (Check y One Reporting Person y More than One Reporting	
Table I - Non-Derivative Securities Beneficially Owned											
·· ····· ·· · · · · · · · · · · · · ·					illy Owned (Instr. 4)			Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
Expi		Expiration Da	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Derivative Security (Instr. 4)		4. Conversion or Exercise	rcise (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Price of Derivative Security	Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Daivd D. Campbell By: Laura Lynn Smith Attorney-In-Fact

04/05/2012

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).