SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

Spongo Elizabeth			Date of Event R atement (Month/ 1/04/2022		3. Issuer Name and Ticker or Trading Symbol <u>GRAPHIC PACKAGING HOLDING CO</u> [GPK]					
(Last) 1500 RIVERE SUITE 100 (Street) ATLANTA (City)	(First) DGE PARKWAY GA (State)	(Middle) Y 30328 (Zip)				ionship of Reporting Person(all applicable) Director Officer (give title below) EVP, Human Res	10% Owner Other (spec below)	(M 6. Ap	ndividual or Joint/ plicable Line)	te of Original Filed Group Filing (Check y One Reporting Person y More than One Reporting
Table I - Non-Derivative Securities Beneficially Owned										
					nt of Securities Illy Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
Expirati			Expiration D	. Date Exercisable and Expiration Date Month/Day/Year)		3. Title and Amount of Securities Derivative Security (Instr. 4)		4. Conversion or Exercise	ise (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Price of Derivative Security	Indirect (I) (Instr. 5)	

Explanation of Responses:

Remarks:

No securities are beneficially owned.

<u>/s/ Elizabeth Spence, by Laura</u> Lynn Church, Attorney-in-Fact

04/04/2022

** 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 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).

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.