FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO

OMB Number:	3235-0287
Estimated average burden	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

1. Name and Address of	of Reporting Person*		2. Issuer Name and Ticker or Trading Symbol BALL Corp [BLL]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Sapp Betty J.				X	Director	10% Owner			
					Officer (give title	Other (specify			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/15/2021		below)	below)			
9200 W. 108TH CI	RCLE		00/13/2021						
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	dual or Joint/Group Filing (Che	ck Applicable Line)			
WESTMINSTER	CO	80021		X	Form filed by One Reporting	Person			
					Form filed by More than One	Reporting Person			
(City)	(State)	(Zip)							
			I						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)			Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr.	or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	3 and 4)		(111341. 4)

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. Transac Code (Ir 8)		Derivative		Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Deferred Compensation Company Stock Plan	(1)	06/15/2021		J ⁽²⁾		332.2371		(3)	(3)	Common Stock	332.2371	\$81.41	648.3963	D ⁽⁴⁾	

Explanation of Responses:

- 1. Each unit may be settled for a single share of stock or the equivalent amount of cash pursuant to the Ball Corporation Deferred Compensation Company Stock Plan.
- $2. \ Contribution \ of \ quarterly \ directors \ fees \ and \ possible \ company \ match \ in \ Ball \ Corporation \ Deferred \ Compensation \ Company \ Stock \ Plan.$
- 3. Stock units in Ball Corporation's Deferred Compensation Company Stock Plan are distributed upon the separation of service in accordance with the Plan.
- 4. The securities included herein represent only those securities that are required to be disclosed pursuant to Section 16(a) of the Securities Exchange Act of 1934 in connection with the specific transaction(s) reported herein. The reporting person is the beneficial owner of additional shares and/or derivative securities of the issuer that are not disclosed on this Form 4. For additional information regarding the reporting person's ownership of issuer securities, refer to Forms 4 previously filed by the reporting person.

/s/ Charles E. Baker attorney-infact for Ms. Sapp

06/17/2021

** 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.