FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB A	PPR	OVA
-------	-----	-----

OMB Number:	3235-0287
Estimated average burden	
hours per response:	0.5

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 Reporting Person* BAKER CHARLES E			2. Issuer Name and Ticker or Trading Symbol BALL CORP [BLL]		onship of Reporting Person(s) all applicable) Director Officer (give title below)	to Issuer 10% Owner Other (specify below)
(Last) BALL CORPORA 10 LONGS PEAK		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/17/2012		VP,GEN COUNSEL & C	,
(Street) BROOMFIELD (City)	CO (State)	80021-2510 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individ	dual or Joint/Group Filing (Che Form filed by One Reporting Form filed by More than One	Person

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	12/17/2012		J ⁽¹⁾		7.4086	Α	\$44.2	39,815.3134	D	
Common Stock								1,978.22	I	401(k) Plan ⁽²⁾
Common Stock								400	I	By Daughter ⁽³⁾
Common Stock								640	I	By Son ⁽³⁾

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. Transaction Code (Instr. 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	Form: Direct (D)	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	(4)	12/17/2012		J ⁽⁵⁾		58.1932		(6)	(6)	Common Stock	58.1932	\$44.2	25,779.5229	D	

Explanation of Responses:

- 1. Dividend reinvestment in Ball Corporation's 2000 Deferred Compensation Company Stock Plan.
- 2. Total number of 401(k) Plan shares acquired through periodic dividend reinvestment, participant's contributions and employer matching contributions
- 3. The reporting person expressly disclaims beneficial ownership of these securities.
- 4. 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.
- 5. Dividend reinvestment in Ball Corporation's Deferred Compensation Company Stock Plan.
- 6. Stock units in Ball Corporation's Deferred Compensation Company Stock Plan are distributed upon the separation of service in accordance with the Plan.

/s/ Janice L. Rodriguez, attorneyin-fact for Mr. Baker

** Signature of Reporting Person Date

12/18/2012

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.