FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
| | | | |

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

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

| Name and Address of Reporting Person* Wulf Eric | | | 2. Issuer Name and Ticker or Trading Symbol Pactiv Evergreen Inc. [PTVE] | | | | | | | | (Che | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) President, Food Merchandising | | | | | | |
|--|----------|--------------------------------------|---|--|---|---|--------|---|--|---|---|--|---|---|--------|---|---|--|
| (Last) (First) (Middle) C/O PACTIV EVERGREEN INC. 1900 W. FIELD COURT | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/02/2021 | | | | | | | | | | | | | |
| (Street) LAKE FO | OREST IL | | 60045 (Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line | ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date | | | Execution Date, | | 3. Transactio Code (Inst | n Dis | | | | 5. Amour Securitie Beneficia Owned F | s ally ollowing | 6. Own Form: I (D) or I (I) (Inst | Direct of ndirect Etr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | Code V | Am | ount | (A) or Price | | | nsaction(s) str. 3 and 4) | | 1 | (Instr. 4) | | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| | | ransaction of ode (Instr. Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 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 Transaction(s) (Instr. 4) | | Do. Dwnership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | | |
| | | | | c | ode | v | (A) | (D) | Date Exercisable | Expira Date | ation | Title | Amount or Number of Shares | | | | | |
| Restricted Stock Units | (1) | 03/02/2021 | | | A | | 10,843 | | (2) | (2) |) | Common Stock | 10,843 | \$0.00 | 10,843 | 3 | D | |
| Restricted Stock Units | (1) | 03/02/2021 | | | A | | 15,274 | | (3) | (3) |) | Common Stock | 15,274 | \$0.00 | 15,274 | 1 | D | |

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of Pactiv Evergreen Inc. common stock.
- 2. RSUs vest on March 2, 2022.
- 3. RSUs vest as follows: 5,091 of the RSUs vest on March 2, 2022; 5,091 of the RSUs vest on March 2, 2023; and 5,092 of the RSUs vest on March 2, 2024.

Remarks:

/s/ Tracy L. Whitman, as 03/04/2021 Attorney-in-Fact for Eric Wulf

** Signature of Reporting Person

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.