## Edgar Filing: BALL CORP - Form 4

BALL COR	Р										
Form 4											
March 16, 20	005										
FORM	1 4								-	PPROVAL	
	UNITE	D STATES		ITIES A hington,			NGE (	COMMISSION	OMB Number:	3235-0287	
Check this box									Expires:	January 31,	
if no long subject to	~ <b>N N N N N N N N N N</b>	EMENT O	F CHAN	GES IN I	BENEFI	CIA	L OW	NERSHIP OF	•	2005	
Section 1		SECURITIES							Estimated average burden hours per		
Form 4 o	or								response 0.5		
Form 5	Filed J	pursuant to S	Section 10	6(a) of the	e Securit	ies Ez	xchang	ge Act of 1934,			
obligation may cont				•	•	- ·		f 1935 or Sectio	n		
See Instru		30(h)	of the Inv	vestment	Compan	y Act	of 194	40			
1(b).											
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <sup>*</sup> _2. Issuer Name and Ticker or Trading 5. R						5. Relationship of Reporting Person(s) to					
SOLSO TH	Symbol					Issuer					
			BALL CORP [BLL]					(Chaok all applicable)			
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check all applicable)			
()	(= ===)	()	(Month/D		ansaction			X Director	10%	Owner	
BALL COR	PORATION,	10 LONGS						Officer (give	title Othe	er (specify	
PEAK DR.	,							below)	below)		
	(Street)		4 If Ame	ndment Da	te Original			6 Individual or Id	oint/Group Filir	og(Check	
· · · · · · · · · · · · · · · · · · ·				. If Amendment, Date Original iled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
			1 neu(won	(II/Day/Tear)	,			_X_ Form filed by (	One Reporting Pe	erson	
BROOMFII	ELD, CO 8002	21-2510						Form filed by N	Nore than One Re	eporting	
								Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction			3.				5. Amount of	6. Ownership		
Security	(Month/Day/Ye		on Date, if	Transaction(A) or Disposed of				Securities	Form: Direct	Indirect	
(Instr. 3)		any (Month/	Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)			5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(Ivionui)	Day/Tear)	(111501.0)	(111501. 5,	+ and	5)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	03/15/2005			J <u>(1)</u>	1	A	\$ 45.1	40,302	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh			
	Director	10% Owner	Officer	Other	
SOLSO THEODORE M					
BALL CORPORATION	х				
10 LONGS PEAK DR.	Λ				
BROOMFIELD, CO 80021-2510					
Signatures					
By: Charles E. Baker, GenCounse Solso	03/16/2005				
<u>**</u> Signature of I	Date				

## **Explanation of Responses:**

- \* 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).
- (1) Dividend reinvestment in Ball Corporation Deferred Compensation Company Stock Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.