SEC Form 4													
FORM 4	D STA	STATES SECURITIES AND EXCHANGE COM Washington, D.C. 20549							SSION OMB APPROVAL				
Section 16. Form 4 or Form 5 obligations may continue. See				A pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940						HIP OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
1. Name and Address of Reporting Person [*] <u>Pace Stephan M.</u>				2. Issuer Name and Ticker or Trading Symbol <u>Reynolds Consumer Products Inc.</u> [REYN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify			
(Last) (First) C/O REYNOLDS CONSUMER P 1900 W. FIELD COURT	DS CONSUMER PRODUCTS INC.			3. Date of Earliest Transaction (Month/Day/Year) 12/05/2024						below) below) below) President, Sales Evolution			
(Street) LAKE FOREST IL (City) (State)	60045 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indir Line)	,			
Та	ble I - No	n-Deriva	tive S	ecurities Acq	uired,	Dis	posed of,	or Ben	eficially	Owned			
1. Title of Security (Instr. 3)		2. Transac Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)	Acquired (D) (Instr	l (A) or . 3, 4 and	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
				Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		
Common Stock		12/05/	2024		М		566(1)	A	\$ <u>0</u>	24,982	D		
Common Stock		12/05/	2024		F		566 ⁽²⁾	D	\$27.76	24,416	D		
	Table II -	Derivati	ve Se	curities Acqui	ired C)isna	sed of or	Bene	ficially C)wned			

(3)

Conversion

or Exercise Price of

Derivative Security

3. Transaction

Date (Month/Day/Year)

12/05/2024

Explanation of Responses:

1. Represents the number of restricted stock units ("RSUs") having a value sufficient to cover certain tax withholding obligations as described in footnote (2) below.

v

Code

Μ

4. Transaction Code (Instr. 8)

2. Represents units withheld from an RSU award held by the reporting person to satisfy FICA and related taxes associated with the retirement eligibility of the reporting person under the terms of such award. 3. Each RSU represents a contingent right to receive one share of Reynolds Consumer Products Inc. common stock.

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

6. Date Exercisable and

Expiration Date

(4)

Expiration Date (Month/Day/Year)

Date Exercisable

(4)

7. Title and

Amount of

Title

Commor

Stock

Securities Underlying Derivative Security (Instr. 3 and 4)

Amount or Number

of Shares

566

5. Number

Derivative Securities

Securities Acquired (A) or Disposed of (D) (Instr. 3, 4

and 5)

(A) (D)

566⁽¹⁾

4. The RSUs vest on February 1, 2026.

Remarks:

Restricted

Stock

Units

1. Title of

Derivative

Security (Instr. 3)

/s/ C. David Watson, Attorney-12/09/2024 in-Fact for Stephan M. Pace

8. Price of Derivative

Security (Instr. 5)

\$<mark>0</mark>

9. Number of

derivative

Securities Beneficially

Owned Following Reported Transaction(s) (Instr. 4)

17,051

10.

Ownership Form: Direct (D)

or Indirect (I) (Instr. 4)

D

11. Nature

of Indirect Beneficial

Ownership

(Instr. 4)

** Signature of Reporting Person Date

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

3A. Deemed

Execution Date

if any (Month/Day/Year)

* 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.