HAYES JOHN A Form 4/A January 25, 2011

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or

Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person * HAYES JOHN A			2. Issuer Name and Ticker or Trading Symbol BALL CORP [BLL]					ng	5. Relationship of Reporting Person(s) to Issuer			
				_			(Check all applicable)					
(Last)	(First) (I	Middle)	3. Date of Earliest Transaction (Month/Day/Year)					_X_ Director	10%	Owner		
BALL CORPORATION, 10 LONGS			(Month/Day/Year) 01/21/2011						_X_ Officer (give	titleOthe	er (specify	
PEAK DR.	0112112011						below) below) PRESIDENT & C.O.O. BALL CORP.					
(Street) 4.			4. If Ame	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
· · · · · · · · · · · · · · · · · · ·				iled(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person			
BROOMFIELD, CO 80021-2510				01/24/2011					Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - No	n-D	erivative	Secui	ities Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution		3. Transa Code (Instr.		4. Securi on(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	01/21/2011			J <u>(1)</u>		424	A	\$ 69.54	75,156.6512	D		
Common Stock	01/21/2011			F <u>(1)</u>		670	D	\$ 69.54	74,486.6512	D		
Common									0.145.741		401(k)	

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

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2,145.741

Plan (2)

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number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	m: .1	or		
						Exercisable	Date	Title	Number		
				~					of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address			F	
	Director	10% Owner	Officer	Other

HAYES JOHN A
BALL CORPORATION
10 LONGS PEAK DR.

X PRESIDENT & C.O.O. BALL CORP.

Relationships

BROOMFIELD, CO 80021-2510

Signatures

Janice L. Rodriguez, attorney-in-fact for Mr.
Hayes

01/25/2011

**Signature of Reporting Person 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).
- This amendment corrects the number of shares that were withheld for the tax obligation on the lapsed RSUs reported in reporting person's (1) January 24, 2011 Form 4. Due to an administrative error, the shares were inadvertently shown as 424 when they should have been 670
- shares.
- (2) Total number of 401(k) Plan shares includes shares acquired through periodic dividend reinvestment, participant's contributions and employer matching contributions.

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.

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