Edgar Filing: TUPPERWARE BRANDS CORP - Form 4

TIDDEDW	ARE BRANDS	CODD										
Form 4	AKE DKANDS	CORP										
February 16	, 2011											
FORM		ITIES AND EXCHANGE COMM				OMB APPROVAL						
	UNITE	JSIAIL		shington,			NGE (/UNINII551011	OMB Number:	3235-0)287	
Check th if no long	ner	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires:	January	/ 31, 2005	
subject to	SIAIE								Estimated average			
Section 16. SECURITIES Form 4 or						burden hours per response		0.5				
Form 5 obligatio	-						-	e Act of 1934,				
may con	tinue. Section 1			tility Holc	•	· ·		1935 or Section	1			
<i>See</i> Instr 1(b).	uction	20(11)		, estiment	compun	<i>y</i> 110		•				
(Print or Type]	Responses)											
(I fint of Type)	((csponses)											
HAJEK JOSEF Symb				2. Issuer Name and Ticker or Trading Symbol TUPPERWARE BRANDS CORP				5. Relationship of Reporting Person(s) to				
								Issuer				
	[TUP]					(Check all applicable)						
(Last)	(First)	(Middle)		f Earliest Tr	ansaction			Director 10% Owner				
TUPPERWARE BRANDS				(Month/Day/Year) 02/14/2011				XOfficer (give titleOther (specify below) below)				
CORP, PO			02/14/2	011				SVP, Tax	& Gov't Relat	ions		
(Street) 4. If				. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
							Ampliashia Lina)	pplicable Line) X_ Form filed by One Reporting Person				
				th/Day/Year)				one Reporting Pe	rson		
ORLANDC), FL 32802-235	53		ith/Day/Year)							
ORLANDC (City)	0, FL 32802-235 (State)	53 (Zip)				Secur	ities Acq	_X_ Form filed by C Form filed by M	ore than One Re	porting		
(City) 1.Title of	(State) 2. Transaction D	(Zip) ate 2A. Dee	Tab l	e I - Non-D 3.	Derivative	ties A	cquired	_X_ Form filed by C Form filed by M Person uired, Disposed of 5. Amount of	ore than One Re , or Beneficial 6. Ownership	porting ly Owned 7. Nature	e of	
(City) 1.Title of Security	(State)	(Zip) ate 2A. Dee r) Executio	Tab l	e I - Non-D 3.	erivative 4. Securit on(A) or Di	ties Ao spose	cquired d of (D)	_X_ Form filed by C Form filed by M Person uired, Disposed of 5. Amount of Securities	ore than One Re	porting ly Owned 7. Nature Indirect		
(City) 1.Title of	(State) 2. Transaction D	(Zip) ate 2A. Dee r) Executio any	Tab l	e I - Non-D 3. Transactio	Derivative	ties Ao spose	cquired d of (D)	_X_ Form filed by C Form filed by M Person uired, Disposed of 5. Amount of Securities Beneficially Owned	or Beneficial 6. Ownership Form: Direct (D) or Indirect (I)	porting ly Owned 7. Nature Indirect Beneficia Ownershi	al	
(City) 1.Title of Security	(State) 2. Transaction D	(Zip) ate 2A. Dee r) Executio any	Tabl med on Date, if	e I - Non-D 3. Transactic Code	erivative 4. Securit on(A) or Di	ties Ad spose 4 and	cquired d of (D)	_X_ Form filed by C Form filed by M Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported	or Beneficial 6. Ownership Form: Direct (D) or	porting ly Owned 7. Nature Indirect Beneficia	al	
(City) 1.Title of Security	(State) 2. Transaction D	(Zip) ate 2A. Dee r) Executio any	Tabl med on Date, if	e I - Non-D 3. Transactic Code (Instr. 8)	4. Securit 4. Securit on(A) or Di (Instr. 3,	ties Ad spose 4 and (A) or	cquired d of (D) 5)	_X_ Form filed by C Form filed by M Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	or Beneficial 6. Ownership Form: Direct (D) or Indirect (I)	porting ly Owned 7. Nature Indirect Beneficia Ownershi	al	
(City) 1.Title of Security (Instr. 3)	(State) 2. Transaction Day (Month/Day/Yea)	(Zip) ate 2A. Dee r) Executio any	Tabl med on Date, if	e I - Non-D 3. Transactic Code (Instr. 8) Code V	erivative 4. Securit on(A) or Di (Instr. 3, Amount	ties Ad spose 4 and (A) or (D)	cquired d of (D) 5) Price	_X_ Form filed by C Form filed by M Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	or Beneficial 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	porting ly Owned 7. Nature Indirect Beneficia Ownershi	al	
(City) 1.Title of Security	(State) 2. Transaction D	(Zip) ate 2A. Dee r) Executio any	Tabl med on Date, if	e I - Non-D 3. Transactic Code (Instr. 8)	4. Securit 4. Securit on(A) or Di (Instr. 3,	ties Ad spose 4 and (A) or	cquired d of (D) 5)	_X_ Form filed by C Form filed by M Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	or Beneficial 6. Ownership Form: Direct (D) or Indirect (I)	porting ly Owned 7. Nature Indirect Beneficia Ownershi	al	
(City) 1.Title of Security (Instr. 3)	(State) 2. Transaction Day (Month/Day/Yea)	(Zip) ate 2A. Dee r) Executio any	Tabl med on Date, if	e I - Non-D 3. Transactic Code (Instr. 8) Code V	4. Securit on(A) or Di (Instr. 3, Amount 3,695	ties Ad spose 4 and (A) or (D)	cquired d of (D) 5) Price	_X_ Form filed by C Form filed by M Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	or Beneficial 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	porting ly Owned 7. Nature Indirect Beneficia Ownershi	al	

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

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 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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying tities (. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
HAJEK JOSEF TUPPERWARE BRANDS CORP PO BOX 2353 ORLANDO, FL 32802-2353			SVP, Tax & Gov't Relations					
Signatures								
/s/ Susan R. Coumes, Attorney-in-Fact	02/16/2	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).

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.