FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APF	PROVAL
OMB Number:	3235-0287

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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:			
ON TEMENT OF OUR WOLD IN BEITE FOR A CONTROL OF THE CONTROL	Estimated average bur	rden		
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:			
or Section 30(h) of the Investment Company Act of 1940				

Check this box to indicate that a 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* Parks David (Last) (First) (Middle) 9335 HARRIS CORNERS PKWY SUITE 300 (Street)						Issuer Name and Ticker or Trading Symbol Magnera Corp [MAGN] 3. Date of Earliest Transaction (Month/Day/Year) 11/04/2024 4. If Amendment, Date of Original Filed (Month/Day/Year)							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify below) President, Americas 6. Individual or Joint/Group Filing (Check Applicable Line)						
l ` ′	CHARLOTTE NC 28269				,										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. Trans Date (Month/I	action	·	2A. Deemed Execution Date if any (Month/Day/Yea		3. Transaction Code (Instr.		tion	4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		(A) or	5. Amou Securiti Benefic Owned	int of es ially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
										Code	v	Amount	Amount (A) or (D)		Price	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)
Common	Stock, Par	Value \$.01													5.	531(1)		D		
	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 Da if any (Month/Day/	ate,	4. Transa Code (B)		tion of Exp			6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)			ecurity	8. Price of Derivative Security (Instr. 5)	ative derivative rity Securities		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable		xpiration ate	Title	O N O	lumber					
Restricted Stock Units	(2)								11/04/	/2025 ⁽³⁾) 11	1/04/2027	Comn Stoc Par Valu \$.0	k, ie	5,938		5,938		D	
Restricted Stock Units	(2)								11/04/	/2027 ⁽⁴⁾) 11	1/04/2027	Comn Stoc Par Valu \$.0	k, e 1	1,876		11,876	5	D	

Explanation of Responses:

- 1. Represents shares of the Issuer acquired upon the closing of a series of transactions pursuant to which a wholly-owned subsidiary of the Issuer combined with Berry Global Group Inc.'s global nonwovens and hygiene films business in a Reverse Morris Trust transaction (collectively, the "Transactions").
- 2. Not applicable to this transaction. RSUs have no value until all restrictions lapse on the final vesting date.
- 3. This grant vests one-third 11/4/2025, one-third 11/4/2026 and one-third 11/4/2027. This grant vests in full, and all restrictions lapse, three years from the Grant Date.
- 4. This grant vests in full and all restrictions lapse three years from the Grant Date, subject to the individual's continuous employment with Magnera Corporation.

/s/ Laura A. Jones, attorney-in-11/06/2024 fact for David Parks

** 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.