Edgar Filing: Fortune Brands Home & Security, Inc. - Form 4/A

Fortune Brands Home & Security, Inc. Form 4/A October 07, 2015

October 07	, 2015											
FORM	Л 4			~						OMB A	PPROVA	۹L
-	UNITED	STATES		RITIES A shington			NGE	COMMISSIO		OMB Jumber:		-0287
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Statement OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 Sect 30(h) of the Investment Company Act of 1940									F 5 7	Estimated average burden hours per response		ry 31, 2005 0.5
<i>See</i> Inst 1(b).	ruction	50(II)		nvestmen	i Compai	ly Act	. 01 1.	740				
(Print or Type	Responses)											
1. Name and Savan Mar	Address of Reporting k	2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer					
			Fortune Brands Home & Security, Inc. [FBHS]					(Check all applicable)				
(Last) 520 LAKE	(First) (3. Date of Earliest Transaction (Month/Day/Year) 02/23/2015					Director 10% Owner X Officer (give title Other (specify below) below) President, Therma-Tru Corp.					
	(Street)	4. If Amendment, Date Original Filed(Month/Day/Year) 02/25/2015					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
DEERFIEI	LD, IL 60015		0212312	2015				Form filed by Person				
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securi	ties Ac	cquired, Disposed	l of, oı	Beneficia	lly Owne	d
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code (Instr. 8)	4. Securit nAcquired Disposed (Instr. 3, 4 Amount	(A) or of (D) 4 and 5) (A) or)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Forn	wnership n: Direct or Indirect r. 4)	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al 1ip
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities bene	•		•	•				
							-	oond to the coll ained in this for			SEC 1474 (9-02)	

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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	I
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

8 E S

(Instr. 3)) Price of Derivative Security		(1	Month/Day/Year	r) (Instr.)	8)	Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of				(
					Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Options (Right to Buy)	\$ 47.87 (1)	02/23/2	2015		A <u>(2)</u>		22,400		(3)	02/23/2025	Common Stock	22,400		
Reporting Owners														
Reporting Owner Name / Address					Relatio	nsh	nips							
Reporting Owner Rame /		1 uu i 055	Director	10% Owner	Officer					Other				
Savan Mark 520 LAKE COOK ROAD DEERFIELD, IL 60015					Preside	sident, Therma-Tru Corp.								
Signatures														

10/07/2015

/s/ Angela M. Pla, Attorney-in-Fact for Mark Savan

<u>**</u>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).
- (1) This amended report is filed to correct the exercise price of the stock options granted on February 23, 2015, which was inadvertently misstated in the original form.
- (2) Reflects the grant of options under the issuer's Long-Term Incentive Plans.
- (3) The options vest in three equal annual installments beginning on February 28, 2016.

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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