Edgar Filing: POLISTINA TERRY - Form 4

POLISTINA Form 4	TERRY											
October 04, 2	2017											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									r	OMB APPROVAL		
		SECURITIES AND EXCHANGE CC Washington, D.C. 20549					OMB Number:	3235-0287				
Check thi if no long subject to Section 10 Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b).	er STAT 6. Filed p ¹⁵ Section 1	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, ection 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							burden hou response	Estimated average burden hours per response 0.5		
(Print or Type R	lesponses)											
5			2. Issuer Name and Ticker or Trading Symbol Spectrum Brands Holdings, Inc. [SPB]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	(First) RUM BRANI 5, INC., 3001 I		3. Date of (Month/Da 10/02/20	-	nsaction			X Director Officer (give below)		6 Owner er (specify		
MIDDLETC	(Street) 4. If Amer Filed(Mont				e Original			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 				
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution D		on Date, if	n Date, if TransactionAcquired (A) or Code Disposed of (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
Common Stock	10/02/2017			Code V A	Amount 2,360 (1)	or (D) A	Price \$ 0	(Instr. 3 and 4) 24,523	D			
Common Stock	10/02/2017			А	142 (2)	А	\$0	24,665	D			

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

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 control number.

Edgar Filing: POLISTINA TERRY - Form 4

 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)	4. Transactio 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 ities . 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			
POLISTINA TERRY C/O SPECTRUM BRANDS HOLDINGS 3001 DEMING WAY MIDDLETON, WI 53562	S, INC.	X					
Signatures							
/s/ Nathan E. Fagre, attorney-in-fact	10/04/20)17					
**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).
- Reporting Person was awarded 2,360 restricted stock units under the Spectrum Brands Holdings, Inc. 2011 Omnibus Equity Award Plan (1) which are settled in shares of common stock of the Issuer and which are scheduled to vest in full on October 1, 2018, if Reporting Person is a director of the Issuer on such date.

Reporting Person was awarded 142 restricted stock units under the Spectrum Brands Holdings, Inc. 2011 Omnibus Equity Award Plan(2) which are settled in shares of common stock of the Issuer and which vested in full on October 2, 2017. The restricted stock units were awarded to the Reporting Person in connection with his service as chairman of the Audit Committee during fiscal year 2017.

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.