FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1 Nome on	nd Addross of	Donorting Doroon*			2 15	suer	Name a	nd Tick	ker or Tra	ndina :	Symbol			5	Relations	hip of Reportir	ng Person(s	to Issuer	_
Name and Address of Reporting Person* Maura David M				2. Issuer Name and Ticker or Trading Symbol Spectrum Brands Holdings, Inc. [SPB]									applicable)		10 100001				
Maura David M													X Dir	ector	1	0% Owner			
(Last) (First) (Middle) C/O SPECTRUM BRANDS HOLDINGS, INC			IC.	3. Date of Earliest Transaction (Month/Day/Year) 08/15/2013										icer (give title ow)		Other (specify below)			
601 RAY	OVAC DR	IVE			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable				
(Street) MADISON WI 53711												X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(St	ate) (Zip)										Pe	rson					
		Tabl	e I - No	n-Deriv	ative	Se	curitie	s Ac	quired,	, Dis	posed o	f, or	Ben	efici	ally Ow	ned			
Date				nsaction :h/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			nd Sec Ben Owr	mount of urities eficially ed Following orted	6. Owners Form: Dire (D) or Indi (I) (Instr. 4)	of Indirect rect Beneficial Ownershi	of Indirect Beneficial Ownership	
								Code	v	Amount	0	(A) or (D)	Price	Trar	saction(s) r. 3 and 4)		(Instr. 4)		
Common Stock (par value \$0.01 per share)			08/15	08/15/2013				S		18,500 I		D	\$62	.59	108,500	D ⁽¹⁾			
Common Stock (par value \$0.01 per share)			08/15	5/2013				S	s 1,500			D	\$63	.33	107,000				
		Та									osed of, onvertib				y Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Code (Instr.		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		Owner: Form: Direct or Indi (I) (Inst	(D) Beneficial Ownershirect (Instr. 4)	et al
		Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of	nber res								

Explanation of Responses:

- 1. The price shown in Column 4 is the weighted average purchase price of these Shares on the transaction date. The price range for the purchases is \$62.22 to \$63.22 per Share. The Reporting Person undertakes to provide upon request by the staff of the Securities and Exchange Commission, the Issuer or a security holder of the Issuer full information regarding the number of Shares purchased at each separate price
- 2. The price shown in Column 4 is the weighted average purchase price of these Shares on the transaction date. The price range for the purchases is \$63.25 to \$63.57 per Share. The Reporting Person undertakes to provide upon request by the staff of the Securities and Exchange Commission, the Issuer or a security holder of the Issuer full information regarding the number of Shares purchased at each separate price.

/s/ David M. Maura 08/16/2013

** Signature of Reporting Person Date

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.