FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Maura David M						2. Issuer Name and Ticker or Trading Symbol Spectrum Brands Holdings, Inc. [SPB]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
														X	Dire	ctor	10%	Owner	
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)								X	Offic belov	er (give title w)	Othe belo	r (specify v)	
C/O SPECTRUM BRANDS HOLDINGS, INC.					02/	02/13/2020									Executive Chairman and CEO				
3001 DEMING WAY																			
					- 4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)							-	6. Individual or Joint/Group Filing (Check Applicable					
(Street)					"	4. II Amendment, Date of Original Filed (World)/Ddy/fedi)								Line)					
MIDDLE	ETON W	I 5	53562											X	X Form filed by One Reporting Person				
					-									Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)												reis	SOIT			
		Tabl	le I - 1	Non-Deriv	ative/	Seci	uritie	s Ad	cquire	ed, D	isposed o	f, or E	Benefici	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yo					Execution Date, (ear) if any			3. Transaction Code (Instr. 2, 4 Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and					nd 5) Securit Benefic		ficially	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial		
						(Month/Day/Year)								Owned Follow Reported		rted	g (I) (Instr. 4)	Ownership (Instr. 4)	
									Code	V	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				
Common Stock 02/13/202						20			P		16,709	A	\$59.84	48 ⁽¹⁾	387,857		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
				(e.g., p	uts, c	alis,	warr	ants	, opti	ions,	convertib	le sec	urities)						
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any				ransaction (code (Instr. I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date	cisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$59.76 to \$59.92, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth herein.

> /s/ Sara Pollock, Attorney-in-Fact for David M. Maura

02/13/2020

** 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.