FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 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. Name and Address of Reporting Person* Maura David M				2. Issuer Name and Ticker or Trading Symbol Spectrum Brands Holdings, Inc. [SPB]									tionship of Reporting F all applicable) Director		.,	Person(s) to Issuer 10% Owner			
(Last) (First) (Middle) C/O SPECTRUM BRANDS HOLDINGS, INC. 3001 DEMING WAY						3. Date of Earliest Transaction (Month/Day/Year) 12/10/2015									Office below	er (give title v)	Othe belov	(specify y)	
,	MING WA	Y			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) MIDDLE	TON W	I 5	53562												X		n filed by Mor	e Reporting Per re than One Re	
(City)	(St	ate) (2	Zip)																
		Tabl	e I - Noi	n-Deriva	ative	Se	curitie	s Acc	quired	Dis	posed o	f, or	Ben	eficia	ally	Owne	ed		
1. Title of Security (Instr. 3) 2. Transa Date (Month/L			Exe Day/Year) if ar		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		rities Acquired (A ed Of (D) (Instr. 3,				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount		A) or D)	Price		Transaction(s) (Instr. 3 and 4)			(111501.4)
Common Stock 13				12/10	10/2015				A		500	A 9		\$95	.62 237,414 ⁽¹⁾⁽²⁾		',414 ⁽¹⁾⁽²⁾	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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		ay/Year)	Code (8)	ransaction of Code (Instr. Derivative		rative rities iired r osed) : 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		ount nber	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. Includes 3,627 restricted stock units of the Issuer awarded to Reporting Person under the Spectrum Brands Holdings, Inc. 2011 Omnibus Equity Award Plan which are settled in shares of common stock of the Issuer and which are scheduled to vest in full on October 1, 2016 if Reporting Person is a director of the Issuer on such date.

2. Includes 80,000 shares of restricted common stock of the Issuer awarded to Reporting Person on November 25, 2014 under the Spectrum Brands Holdings, Inc. 2011 Omnibus Equity Award Plan which are settled in shares of common stock of the Issuer and which are scheduled to vest in two installments as follows: (i) 50,000 shares on November 25, 2017 (the "Vesting Dates"). Any remaining unvested portion of the award shall be forfeited and cancelled if Reporting Person voluntarily ceases to provide services either as a director or officer to the Issuer prior to the respective Vesting Date(s) for any unvested portion(s).

Remarks:

/s/ Nathan E. Fagre, attorney-12/10/2015 in-fact

** 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.