П

## 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

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

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

|                    |                       |          |   | 1  |                                   |                       |  |  |  |
|--------------------|-----------------------|----------|---|--|-----------------------------------|-----------------------|--|--|--|
|                    | ss of Reporting Perso | on*      | 2. Issuer Name and Ticker or Trading Symbol<br>Spectrum Brands Holdings, Inc. [SPB] | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable) |                                   |                       |  |  |  |
| <u>Maura David</u> |                       |          |   | X  | Director                          | 10% Owner             |  |  |  |
| (Last)             | (First)               | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year)                                    | x  | Officer (give title below)        | Other (specify below) |  |  |  |
|                    | M BRANDS HOL          |          | 08/09/2019  |  | Executive Chairman and CEO        |                       |  |  |  |
| 3001 DEMING        | WAY                   |          |   |  |                                   |                       |  |  |  |
| (Street)           |                       |          | 4. If Amendment, Date of Original Filed (Month/Day/Year)                            | 6. Individual or Joint/Group Filing (Check Applicable Line)                |                                   |                       |  |  |  |
| MIDDLETON          | WI                    | 53562    |   | X  | Form filed by One Rep             | orting Person         |  |  |  |
|                    |                       |          |   |  | Form filed by More that<br>Person | n One Reporting       |  |  |  |
| (City)             | (State)               | (Zip)    |   |  |                                   |                       |  |  |  |

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Code (Insti |   | 4. Securities<br>Disposed Of |               | 3, 4 and 5)                    | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |
|---------------------------------|--|---|-------------|---|------------------------------|---------------|--------------------------------|---|---|---|
|                                 |  |   | Code        | v | Amount                       | (A) or<br>(D) | Price                          | Transaction(s)<br>(Instr. 3 and 4)  |   | (Instr. 4)  |
| Common Stock                    | 08/09/2019                                 |   | Р           |   | 20,000                       | A             | <b>\$50.425</b> <sup>(1)</sup> | 307,951   | D   |   |

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |  | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | d 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr. 3<br>and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|---|---|--|---|------------------------------|---|---|--|--|--------------------|---|--|---|--|--|--|
|   |   |  |   | Code                         | v | (A) (D)   |  | Date<br>Exercisable  | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>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 \$49.41 to \$51.08, 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.

| <u>/s/ Sara Pollock, Attorney-in-</u> | <b>08</b> /1 |
|---------------------------------------|--------------|
| Fact for David M. Maura               | <u>00/</u>   |

Person Date

2/2019

\*\* Signature of Reporting Person

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.