FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANG	GES IN BEN	EFICIAL OV	/NERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
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l	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*  MATTHEWS NORMAN S				2. Issuer Name <b>and</b> Ticker or Trading Symbol Spectrum Brands Holdings, Inc. [ SPB ]											licable)	•	Person(s) to Issuer 10% Owner				
(Last) (First) (Middle) C/O SPECTRUM BRANDS HOLDINGS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 10/01/2018										Office below	er (give title v)		Other pelow)	(specify	
3001 DEMING WAY  (Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
MIDDLETON WI 53562															Form filed by More than One Reporting Person						
(City)	(St	ate) (2	Zip)																		
		Tabl	e I - Nor	n-Deriva	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally (	Owne	ed				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution D		n Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Seci		cially I Following	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)				(11341. 4)	
Common Stock 10/01/					/2018	3			A		3,279	1)	A	\$	0	29,	186(2)(3)	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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any		Date,		nsaction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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	<u> </u>		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

## **Explanation of Responses:**

- 1. Reporting Person was awarded restricted stock units under the Company's 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, 2019 if Reporting Person is a director of the Issuer on such date.
- 2. Includes 425 restricted shares resulting from the Reporting Person's election to receive stock in lieu of cash for the quarterly retainer paid for service as a member of the Board of Directors on January 1, 2014, and that are scheduled to vest in full on January 1, 2024.
- 3. Includes 399 restricted shares resulting from the Reporting Person's election to receive stock in lieu of cash for the quarterly retainer period paid for service as a member of the Board of Directors on October 1, 2013, and that are scheduled to vest in full upon the last day of the Reporting Person's Board service.

/s/ Nathan E. Fagre, Attorney-10/03/2018 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.