FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | D.C. 20549 |
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| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| nstruction 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

| 1. Name and Address of Reporting Person* STROBEL STEVEN J | | | | 2. Issuer Name and Ticker or Trading Symbol NEWELL BRANDS INC [NWL] | | | | | | | | | | ationship k all appli Directo | , | | | | |
|---|--|------------|---|---|---|---|---|---|--------------------|-----------|---|-----------------|---|-------------------------------------|--|---|--|---------------------------------------|--|
| (Last) (First) (Middle) 221 RIVER STREET | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2018 | | | | | | | | | | Officer below) | (give title | | Other (s below) | specify | | |
| (Street) HOBOK (City) | | tate) (| 07030 (Zip) | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Application) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | n | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Execution Date | | | r, Transaction Dispose Code (Instr. 5) | | | str. 3, 4 | and Securiti Benefic Owned Reporte | | es Formially (D) of Following (I) (I | | n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | Code | V | Amount | t (A) or Pi | | ce | Transac (Instr. 3 | | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| | | | | Transaction of Code (Instr. Derivat | | | tive ties ed sed | 6. Date Exe Expiration (Month/Day | Date | Amount of | | | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | c | ode | v | (A) | (D) | Date Exercisabl | | xpiration ate | Title | Amou or Numb of Share | er | | | | | |
| Restricted Stock | (1) | 05/15/2018 | | | A | | 5,504 | | (2) | | (3) | Common Stock | 5,50 | 4 | \$0 | 5,504 | | D | |

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of Newell Brands Inc. common stock.
- 2. The reporting person shall become fully vested in his or her award upon the earlier of: (i) the first anniversary of the date of the grant of the award; or (ii) the date immediately preceding the date of the Company's 2019 annual meeting of shareholders, provided he or she remains in continuous service on the Board until such date, but the award may vest earlier in the event of death, disability or retirement. If the Company pays a dividend on its common stock, upon vesting, the reporting person will receive an amount in cash equal in value to the dividends that the reporting person would have received had the reporting person been the actual owner of the number of shares of Company common stock represented by the restricted stock units.

3. N/A

Remarks:

/s/ Leah Lower, Attorney in Fact for Steven J. Strobel

05/17/2018

** 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.