FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APP | ROVAL |
|-------------------|-----------|
| OMB Number: | 3235-0287 |
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0.5

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| | Check this box if no longer subject to |
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| \neg | 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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | | | | | _ | | | | | | | | | _ | | | | | | | |
|---|---|--|--|-----------------------------|---|---|--|-------|--------------------------------------|--------|---|---|---------------|---|---|---|---|--|---|--|--|
| 1. Name and Address of Reporting Person* LOPEZ GERARDO I | | | | | | 2. Issuer Name and Ticker or Trading Symbol NEWELL BRANDS INC [NWL] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| LOPEZ GERARDO I | | | | | | | | | | | | | | X | Direc | ctor | 1 | 0% O | wner | | |
| (Last) (First) (Middle) C/O NEWELL BRANDS INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/01/2019 | | | | | | | | | | Officer (give title below) | | | Other (specify below) | | | |
| 221 RIVER STREET | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | | |
| (Street) HOBOKEN NJ 07030 | | | | | | | | | | | | | | | Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Nor | n-Deriv | ative | Se | curitie | s Acc | uired, | Dis | posed o | f, or | Bene | eficia | ally (| Owne | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | ar) | Executio if any | P.A. Deemed Execution Date, f any Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ities Acquired (A) d Of (D) (Instr. 3, | | | 4 and S | | 5. Amount of Securities Beneficially Owned Following Reported | | nip ct ect | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | | v | Amount | | (A) or (D) | Price | . 1 | Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock 05/01 | | | | | | 5/01/2019 | | | | | 2,003 | B ⁽¹⁾ A | | \$ | 8,189 | | D | | | | |
| | | Та | ıble II - [| | | | | | | | sed of, onvertib | | | | y Ov | ned | | , | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution D if any (Month/Day/ | Date, Transaction Code (Ins | | | | | 6. Date E: Expiratio (Month/D | n Date | е | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | (D) rect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | | | Date Exercisal | | Expiration Date | of | | nber res | | | | | | | |

Explanation of Responses:

1. The number of shares of Common Stock represents the portion of second quarter 2019 director fees paid in Common Stock based on the Company's closing price on May 1, 2019 of \$14.35.

Remarks:

/s/ Raj Dave, attorney-in-fact for Gerardo I. Lopez

05/03/2019

<u>tor Gerardo I. Lopez</u>** 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.