SEC Form 4

 \Box

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APP | PROVAL |
|------------|----------|
| MB Number: | 3235-028 |

37 O Estimated average burden hours per response: 0.5

| Check this box if no longer subject | S |
|-------------------------------------|---|
| to Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |
| | |

TATEMENT 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

| 1. Name and Address of Reporting Person [*] ICAHN BRETT | | son* | 2. Issuer Name and Ticker or Trading Symbol <u>NEWELL BRANDS INC.</u> [NWL] | | tionship of Reporting all applicable) Director Officer (give title below) | X | 10% Owner |
|--|------------------------|---------|---|-------------------|---|---|--------------------------|
| | C/O NEWELL BRANDS INC. | | 3. Date of Earliest Transaction (Month/Day/Year) 05/01/2020 | | | | Other (specify below) |
| 6655 PEACHTREE DUNWOODY ROAD | | DY ROAD | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | vidual or Joint/Group Filing (Check Applicable | | |
| (Street) ATLANTA | GA | 30328 | | X | Form filed by One Form filed by More | • | U U |
| (City) | (State) | (Zip) | | | Person | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
|---------------------------------|--|---|------------------------------|--|-------------------------|---------------|-------------------|---|---|---|--|
| | | | Code V | | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | |
| Common Stock | 05/01/2020 | | A | | 2,341 ⁽¹⁾⁽²⁾ | Α | \$ <mark>0</mark> | 1,141,249 | D | | |
| Common Stock | | | | | | | | 400,000 | Ι | Charitable Foundation | |

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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Expirati | | Expiration Da | Expiration Date (Month/Day/Year) | | e and int of rities rlying ative rity (Instr. 4) | 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) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|-------------|-----|---------------------|-------------------------------------|-------|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Granted in accordance with the Newell Rubbermaid Inc. 2013 Incentive Plan, as amended.

2. These shares represent the second quarter 2020 director fees paid in Common Stock based on the Company's closing price per share on May 1, 2020, of \$12.28.

Remarks:



** 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.