FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
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).

## 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

1. Name and Address of Reporting Person*  MONTGOMERY CYNTHIA ANN						2. Issuer Name <b>and</b> Ticker or Trading Symbol NEWELL RUBBERMAID INC [ NWL ]									5. Relationship of Report (Check all applicable) X Director			rting Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) C/O NEWELL RUBBERMAID INC.							3. Date of Earliest Transaction (Month/Day/Year) 05/12/2010									(give title		Other (s below)	specify	
3 GLENLAKE PKWY.						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) ATLANTA GA 3032		30328											filed by One Reporting Person filed by More than One Reporting n							
(City)	City) (State) (Zip)																			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)						ar) E	2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Dispose Code (Instr. 5)		ties Acquir d Of (D) (Ins		and Securiti Benefic		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	, .	Amount	(A) o (D)	r Price	Transac (Instr. 3		ction(s)			(Instr. 4)	
	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 I if any (Month/Day	oate, Trans Code			of		6. Date Exercisal Expiration Date (Month/Day/Year		Amount o		f g Security	8. Prid Deriv Secui (Instr.	ative ity	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Dir or I (I) (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Exp Dat	piration te	Title	Amount or Number of Shares							
Restricted Stock Units	(1)	05/12/2010			A		5,844		(2)		(2)	Common Stock	5,844	\$	)	5,844		D		

## **Explanation of Responses:**

- $1. \ Each \ restricted \ stock \ unit \ represents \ a \ contingent \ right \ to \ receive \ one \ share \ of \ Newell \ Rubbermaid \ common \ stock.$
- 2. The reporting person shall become fully vested in his or her award upon the first anniversary of the date of the grant of the award, but the award may vest earlier in the event of death, disability or retirement. Vested shares are to be delivered to the reporting person within 30 days following the date of vesting. Prior to the vesting of the award, if the Company pays a dividend on its common stock, 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 Newell Rubbermaid common stock represented by the restricted stock units.

#### Remarks:

/s/ Christine E. Hermann,
Attorney in Fact for Cynthia A. 05/13/2010
Montgomery

\*\* 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.