Spectrum Brands Holdings, Inc. Form 3 March 02, 2015 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB 3235-0104 Number: January 31, Expires:

2005 Estimated average burden hours per 0.5 response...

(Print or Type Responses)

| 1. Name and Address of Reporting Person <u>*</u> STEINBERG JOSEPH S | 2. Date of Event RequiringStatement(Month/Day/Year) | 3. Issuer Name and Ticker or Trading Symbol Spectrum Brands Holdings, Inc. [SPB] | | | | |
|--|---|--|--|--|--|--|
| (Last) (First) (Middle) C/O LEUCADIA NATIONAL CORPORATION, 520 MADISON AVENUE (Street) NEW YORK, NY 10022 (City) (State) (Zip) | 02/19/2015 Table L - N | OfficerO (give title below) (specify | Filed(Month/Day/Year) able) 10% Owner Other 6. Individual or Joint/Group | | | |
| 1.Title of Security (Instr. 4) | 2. Amount of Beneficially ((Instr. 4) | Securities 3. | 4. Nature of Indirect Beneficial hip Ownership (Instr. 5) D) | | | |
| Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02) 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 control number. SEC 1473 (7-02) | | | | | | |

| 1. Title of Derivative Security (Instr. 4) | | | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | | 4. Conversion or Exercise Price of | 5. Ownership Form of Derivative | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|---------------------|--------------------|--|------------------------|---|--|---|
| | Date Exercisable | Expiration Date | Title | Amount or Number of | Derivative Security | Security: Direct (D) | |

Shares or Indirect (I) (Instr. 5)

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | |
|---|------------|---------------|-----------|---------|-------|--|--|
| | | Director | 10% Owner | Officer | Other | | |
| STEINBERG JOSEPH S C/O LEUCADIA NATIONAL CORPORATION 520 MADISON AVENUE NEW YORK, NY 10022 | | ÂX | Â | Â | Â | | |
| Signatures | | | | | | | |
| /s/ Joseph S. Steinberg | 03/02/2015 | | | | | | |
| ^{**} Signature of Reporting Person | Date | | | | | | |

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.