## Edgar Filing: ICAHN BRETT - Form 4

ICAHN BR	ETT											
Form 4												
November										0145		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									M OMB	APPROVAL 3235-0287		
Check t	his box		Wa	ashing	ton	, D.C. 20	549			Number:	January 31,	
if no lor		MENT OI	F CHAI	NGES	IN	BENEF	ICIA	LOW	NERSHIP OF	Expires:	2005	
subject to STATE VIEW OF CHA. Section 16. Form 4 or						RITIES				Estimated burden ho response	•	
Form 5 obligations may continue. See Instruction 1(b). 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												
(Print or Type	Responses)											
ICAHN BRETT Symbo						d Ticker or NDS INC		-	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (	Middle)					. [	. 21	(Check all applicable)			
(Month			(Month/	Date of Earliest Transaction onth/Day/Year) /12/2018					X Director Officer (give below)	Officer (give title Other (specify		
KI V LK 51	(Street)		1 If Am	andma	•+ D	ata Origina	1		6 Individual or I	oint/Group Fi	ling(Chash	
Filed(M				Amendment, Date Original d(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
HOBOKE	HOBOKEN, NJ 07030								i oportung			
(City)	(State)	(Zip)	Tab	ole I - N	lon-l	Derivative	Secui	ities Acq	uired, Disposed o	of, or Benefic	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	Code (Instr. 3, 4 and 5)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
G				Code	V	Amount	(D)	Price	(Instr. 5 and 4)			
Common Stock	11/12/2018			Р		50,000	А	\$ 20	350,285	D		
Common Stock	11/12/2018			Р		50,000	А	\$ 20.05	400,285	D		
Common Stock	11/13/2018			А	V	0 (1)	А	\$0	462,835 <u>(1)</u>	D		
Common Stock									250,000	Ι	Charitable Foundation	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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.

 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)	4. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
, of the second s	Director	10% Owner	Officer	Other				
ICAHN BRETT C/O NEWELL BRANDS INC. 221 RIVER STREET HOBOKEN, NJ 07030	Х							
Signatures								
/s/ Leah Lower, attorney-in-fact	1	1/14/201	18					

Icahn

<u>\*\*</u>Signature of Reporting Person

Date

## **Explanation of Responses:**

- \* 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).
- (1) Reflects the distribution of indirect shares of common stock from Biscayne Banana LLC. The distribution qualifies as only a change in the form of the Reporting Person's beneficial ownership.

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.