Edgar Filing: NEWELL RUBBERMAID INC - Form 4

NEWELL RUE Form 4 February 14, 20		NC									
								OMB A	OMB APPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-0287		
Check this b		Washington, D.C. 20549									
if no longer subject to Section 16. Form 4 or	SIAIEM	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									
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 Res	sponses)										
DOLV MICHAEL D				2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer				
	NEWELL RUBBERMAID INC [NWL]				(Check all applicable)						
(Last) (First) (Middle)			3. Date of Earliest Transaction				Director		% Owner her (specify		
C/O NEWELI INC., 3 GLEN	(Month/Day/Year) 02/12/2014				XOfficer (give titleOther (specify below) below) President & CEO						
(Street)			4. If Amendment, Date Original			ıl	6. Individual or Joint/Group Filing(Check				
	Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting							
ATLANTA, C	JA 30328						Person				
(City)	(State)	(Zip)	Tab	ole I - Non-D	erivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
	Transaction Date 2A. Deen onth/Day/Year) Execution any (Month/D		Date, if	Transaction Code	4. Securit Acquired Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price	(insure and i)				
Reminder: Report	on a separate line	e for each cl	lass of sec	urities benefi	cially ow	ned directly	or indirectly.				
					inforn requir	nation cont red to response ays a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab			curities Acqu ls, warrants,			Beneficially Owned securities)	1			

1. Title of
Derivative2.3. Transaction Date3A. Deemed4.5. Number of
TransactionDerivative6. Date Exercisable and
Expiration Date7. Title and Amount of
Underlying Securities8. Transaction Derivative

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		Sec (In
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	3
Restricted Stock Units	<u>(1)</u>	02/12/2014		М		77,871		(2)	(2)	Common Stock	77,871	

Reporting Owners

Reporting Owner Name / Address	Relationships							
r g ta ta ta ta ta ta ta	Director	10% Owner	Officer	Other				
POLK MICHAEL B C/O NEWELL RUBBERMAID INC. 3 GLENLAKE PKWY. ATLANTA, GA 30328			President & CEO					
Signatures								
/s/ Christine E. Hermann, Attorney in I Polk	lichael B.	02/14/2014						
<u>**</u> Signature of Reporting Pers		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) Each restricted stock unit represents a contigent right to receive one share Newell Rubbermaid common stock.

The reporting person shall become fully vested in his or her award upon the third anniversary of the date of the grant of the award, but the award may vest earlier in the event of death, disability or retirement. Prior to the vesting of the award, if the Company pays a dividend on

(2) 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.

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.