FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								

37 Estimated average burden 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).

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 7									_
Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol Fortune Brands Home & Security, Inc. [5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Bauer I	<u>Michael I</u>	<u>.</u>						aras r	TOTTLE	<u> </u>	ccurrey,		≟ L			Direc	ctor	10	% Owner	
(Last) (First) (Middle)					- FB	FBHS]									X	Officer (give title below)			Other (specify below)	
(Last)	(F	irst) (Middle)		3. 0	3. Date of Earliest Transaction (Month/Day/Year)									President, Mas			Master Lo	rk	
520 LAKE COOK ROAD					03/11/2015															
SUITE 4	00																			
JOHL	00				4 11	Λmc	ndment	Date	of Origina	l Eilor	d (Month/Da	21/1/20	ar)	16	Individ	dual o	r loint/Grour	Eiling (Che	ck Applicable	_
					- 4. "	AIIIC	ilullient,	, Date 0	n Origina	rriec	מ (וווווווווווווווווווווווווווווווווווו	ау/ ге	ai)		ine)	Juai U	i John/Group	rilling (Cine	x Applicable	
(Street)															X	Form	n filed by One	Reporting I	Person	
DEERFI	ELD II	. (50015												Λ		,			
					_											Form Pers	n filed by Mor	re than One	Reporting	
(6):)	(0		- : \													1 613	OII			
(City)	(S	tate) (Zip)																	
		Tab	e I - Noi	n-Deriv	vative	Se	curitie	s Acc	quired,	Dis	posed o	f, o	r Ben	efici	ally C)wne	ed			
1. Title of S	Security (Ins	tr. 3)		2. Trans	saction	ction 2A. Deemed				3. 4. Securities Acquired (A)								6. Ownersh		
		•		Date	/Day/Va		Execution Date,					isposed Of (D) (Instr. 3, 4			4 and Securi Benefi			Form: Direction (D) or Indirection		of Indirect Beneficial
			(Month/Day/Year)			if any (Month/Day/Year)		Code (Instr. 5) 8)		")						d Following	(I) (Instr. 4)		Ownership	
			l					` ` 	 		1		(a)		Repor		l''' /	(Instr. 4)	(Instr. 4)	
				l					Code	l۷	Amount		(A) or (D)	Price			action(s) 3 and 4)			
						-				┢	+	1.7					•		-	_
Common Stock, Par Value \$0.01 03/11/					1/2015	·				1	8,399		D \$45		5.25 18,753(1)		3,753 ⁽¹⁾	D		
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		Та									osed of, onvertib				y Ow	ned				
1. Title of	2.	3. Transaction	3A. Deem	ed.	4.		5 Nu	mber	6 Date F	verci	sable and	7 T	itle and		8. Pric	o of	9. Number o	f 10.	11. Natur	
Derivative	Conversion		Execution			ransaction				n Dat		Amount of			Derivative		derivative	Owners	hip of Indirec	ct
Security	or Exercise	(Month/Day/Year)	if any		Code (Instr.			(Month/E	Day/Ye	ear)	Securiti Underly				Security	Securities	Form:		Beneficial
(Instr. 3) Price of Derivative Security (Month/Day/				ay/ Year)	8))		Securities Acquired		U					(Instr. 5)		Beneficially Owned	Direct (I		Ownership (Instr. 4)
						(A) OI		(A) or			Security (Instr.			str. 3	3		Following	(I) (Instr		
							of (D) (Instr. 3, 4			and 4)						Reported		(a)		
														Transaction(s) (Instr. 4)	(5)					
		and 5)									` ′									
													Am	ount	1	- 1				
													or							
									Date	- [,	Expiration		Nui	mber						
					Code	١v	(A)	(D)	Exercisa		Date	Title		ares						

Explanation of Responses:

1. Includes a total of 11,531 restricted stock units that have not yet vested.

Remarks:

/s/ Angela M. Pla, Attorney-in-Fact for Michael P. Bauer

03/12/2015

** 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.