FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b)

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to SIAIEWENT OF CHANGES IN BENEFICIAL OVVNERSE Section 16. Form 4 or Form 5	Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Grissom Sheri					2. Issuer Name and Ticker or Trading Symbol Fortune Brands Home & Security, Inc. [ FBHS]										k all applic Directo Officer	Officer (give title Of			ner ner pecify
(Last) (First) (Middle) 520 LAKE COOK ROAD						3. Date of Earliest Transaction (Month/Day/Year) 02/29/2016									SVP - Human Resources				
(Street)  DEERFI  (City)	DEERFIELD IL 60015				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tak	ole I - Noi	n-Deriv	vativ	e Se	curities	s Acc	quired,	Dis	osed o	f, or Be	nefi	cially	Owned				
1. Title of Security (Instr. 3)				2. Trans Date (Month/		Execution Date,			3. Transa Code (I		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securitie Benefici Owned F		es ally Following	Form (D) o	r Indirect   Indirect	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) o	r Pr	ice	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
Common Stock, Par Value \$0.01				02/2	9/201	.6			F <sup>(1)</sup>		1,380	1,380 D		50.22	11,920(2)			D	
Common	Stock, Par	Value \$0.01		02/2	9/201	.6			A <sup>(3)</sup>		3,000	) A	4	60.00	14,9	920 <sup>(4)</sup>		D	
		-	Table II -								sed of, onverti				wned				Ì
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	Date,	4. Transaction Code (Instr. 8)		of		6. Date Ex Expiration (Month/Da	Date	of Secur r) Underlyi		ying tive Security		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisab		xpiration ate	Title	Amo or Num of Sha	nber					
Options (Right to	\$50.22	02/29/2016			A <sup>(5)</sup>		12,100		(6)	0	2/28/2026	Common	12,	100	\$50.22	12,100	0	D	

## **Explanation of Responses:**

- 1. Reflects the withholding by the issuer of shares having a fair market value equal to the withholding taxes payable by the undersigned at the time the RSU award vested and became payable, such transaction being exempt under Rule 16b-3(e).
- 2. Includes a total of 8,866 restricted stock units that have not yet vested.
- 3. Reflects the grant of restricted stock units awarded to the reporting person that vest in three equal annual installments, subject to continued employment through such vesting dates. Each restricted stock until represents a contingent right to receive one share of the issuer's common stock.
- 4. Includes a total of 11,866 restricted stock units that have not yet vested.
- 5. Reflects the grant of options under the issuer's Long-Term Incentive Plan.
- 6. The options vest in three equal annual installments beginning on February 28, 2017.

## Remarks:

/s/ Angela M. Pla, Attorney-in-Fact for Sheri R. Grissom

03/02/2016

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.