## Edgar Filing: GORMAN TIMOTHY W - Form 4

GORMAN T	TIMOTHY W																					
Form 4																						
December 06	5, 2018																					
FORM		CECU				NCEC	OMMERION	OMB APPROVAL														
		SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549					OMB Number:	3235-0287														
Check the if no long								January 31,														
subject to	IENT O	F CHANGES IN BENEFICIAL OWNERSHIP OF						Expires: 2005 Estimated average burden hours per														
Section 16.				SECURITIES																		
Form 4 o Form 5	Section 16(a) of the Securities Exchange Act of 1934,						response 0.5															
obligation	• • • • •						U															
See Instruction 1(b). See Instruction See Instruction																						
(Print or Type F	Responses)																					
			2. Issue	uer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer														
GORMAN TIMOTHY W								155401														
	ENERGIZER HOLDINGS, INC. [ENR]					(Check all applicable)																
(Last)	(First) (I	First) (Middle) 3. Date of Earl			rliest Transaction			Director 10% Owner														
	D. 200.344.DXW			Day/Year)				XOfficer (give titleOther (specify below) below)														
ENERGIZE UNIVERSI	R, 533 MARYV ΓΥ DRIVE	ILLE	12/03/2	018				· · · · · · · · · · · · · · · · · · ·	CFO & CAO													
				ed(Month/Day/Year) App _X				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person														
												(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned
												1.Title of	2. Transaction Date			3.	4. Securi			5. Amount of	6.	7. Nature of
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any		Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially	Ownership Form: Direct	rship Indirect Direct Beneficial												
•			n/Day/Year) (Instr. 8)				5)	Owned	Owned (D) or Own													
								Following	Indirect (I)	(Instr. 4)												
						(A)		Reported Transaction(s)	(Instr. 4)													
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)														
Common							\$	20.110	-													
Stock	12/03/2018			Р	5,000	А	45.435	38,110	D													
Common Stock	12/03/2018			Р	5,000	А	\$ 45.845	43,110	D													

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

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.

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day, e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and int of rlying ities . 3 and 4)	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					
	Director	10% Owner	Officer	Other		
GORMAN TIMOTHY W ENERGIZER 533 MARYVILLE UNIVERSITY DRIVE ST. LOUIS, MO 63141			EVP, CFO & CAO			
Signatures						
By: Melissa A. Nazzoli Attorney in Fact For Gorman	:: Timoth	у	12/04/2018			
<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).

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.