FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVID AFFROVAL									
OMB Number: 3235-028									
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

Name and Address of Reporting Person* SCALZO JOSEPH					2. Issuer Name and Ticker or Trading Symbol Simply Good Foods Co [SMPL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
3CALZ	TO JOSE	<u>en</u>				J				,			X	Director		:	10% Owi	ner	
(Look) (Final) (Middle)					Date of Earliest Transaction (Month/Day/Year)							X	Officer (of below)	give title		Other (sp below)	ecify		
(Last) (First) (Middle)					07/14/2017							CEO and President							
1050 17TH STREET, SUITE 1500																			
(Street)					If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable								
DENVE	R C	0	80265									Line)	9)						
				— I									X	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(9	State)	(Zip)											Form file	ea by More t	man One	Reportir	ng Person	
		Т	able I - Non-I	Deriva	tive S	Securitie	s Ac	auired.	Disi	posed o	of. or B	enefic	cially (Owned					
1. Title of S	Security (Inst			Transac		2A. Deem		3.			ities Acqu			5. Amount	of 6	6. Owners	hip 7	. Nature of	
Date (Month/D					Execution Date,							Securities Beneficiall		orm: Dire	ect Ir	Indirect Beneficial			
					(Month/Day/Y		ay/Yea							Owned Fol		l) (Instr. 4) 0	Ownership (Instr. 4)	
							Code	v	Amount (A) or (D)		rice	Transactio (Instr. 3 an	action(s)		"				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
(e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Trans Code		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date S			7. Title and Amou Securities Underl Derivative Securi		rlying	8. Price of Derivative Security	9. Number derivative Securities	Ov.	vnership rm:	Beneficial	
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	8)				(Instr. 3 and 4)					(Instr. 5)	Beneficiall Owned Following Reported	or	ect (D) Indirect (Instr. 4)			
					and 3)						Amor		unt or		Transactio (Instr. 4)	n(s)			
				Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title		ber of		(111501. 4)				
Options to Purchase Common Stock ⁽¹⁾	\$12	07/14/2017		A		1,200,000		(2)		(2)	Common Stock	1,20	00,000	(1)	1,200,00	00	D		
Otock							$\perp \perp \perp$								L				

Explanation of Responses:

- 1. Represents options to purchase common stock of the Issuer on a one to one basis awarded pursuant to the Issuer's 2017 Long Term Incentive Plan.
- 2. Options vest and become exercisable in three equal installments on July 14, 2018, July 14, 2019 and July 14, 2020, subject to the recipient's continued service with the Company from the date of grant on July 14, 2017. The options expire on the ten-year anniversary of the award.

/s/ Annita M. Menogan, as Attorney-in-Fact for Joseph E.

07/18/2017

Scalzo

** 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.