FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**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

1. Name and Address of Reporting Person* <u>Holm Hanno E</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol Simply Good Foods Co [ SMPL ]									k all applic Directo	tor		10% Ov	ner	
(Last) 1225 177	`	irst) Γ, SUITE 1000	(Middle)			3. Date of Earliest Transaction (Month/Day/Year)  11/08/2018  X Officer (give title below)  VP & Chief Operations Officer														
(Street)  DENVE		tate)	80202 (Zip)		-	4. If Amendment, Date of Original Filed (Month/Day/Year)								ine) X	Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D				saction	ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. S Transaction Dis Code (Instr. 5)		4. Securi	ties Acquir I Of (D) (Ins	ed (A) o	or 5. Amount Securitie Beneficia		s Illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
Common Stock 1				11/0	0/201	/2018			Code V		Amount 9,464 <sup>0</sup>	(D)		e 80	Reported Transacti (Instr. 3 a	tion(s)		D	(Instr. 4)	
Common	Stock	-	Γable II -	Deriva	ative	Sec					sed of,	or Ben	eficia	lly O	]	137		D		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		of		6. Date Exe Expiration (Month/Day	Date		of Securities		D S	. Price of Perivative Pecurity Pecurity	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ive ies cially ng ed ction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amou or Numb of Shares	er						
Options to Purchase Common	\$19.89	11/08/2018			A		16,902		(2)	1	1/08/2028	Common Stock	16,90	)2	\$0	16,902	2	D		

## **Explanation of Responses:**

1. Represents performance-based restricted stock units ("PSUs") granted under the issuer's 2017 Omnibus Incentive Plan. Each PSU represents the contingent right to receive one share of the issuer's common stock. The PSUs vest at the end of a three-year period as follows, subject to the reporting person's continuous service with the issuer as of the vesting date: (i) 50% of the PSUs vest on November 8, 2021 if the closing price of the issuer's common stock for at least 20 of the 30 consecutive trading days immediately prior to November 8, 2021, equals or exceeds 100%, but less than 115%, of the closing price of the issuer's common stock on the grant date, and (ii) 100% of the PSUs vest on November 8, 2021 if the closing price of the issuer's common stock for at least 20 of the 30 consecutive trading days immediately prior to November 8, 2021, meets or exceeds 115% of the closing price of the issuer's common stock on the grant date

2. The stock options vest in three equal annual installments beginning on November 8, 2019, subject to the reporting person's continuous service with the issuer as of each vesting date.

## Remarks:

/s/ Timothy A. Matthews, as

11/09/2018 Attorney-in-Fact for Hanno E.

Holm

\*\* 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.