FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| TATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
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| OMB APPF | ROVAL | | | | | |
|--------------------------|-------|--|--|--|--|--|
| 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

| 1. Name and Address of Reporting Person* BRUST ROBERT H | | | | | | 2. Issuer Name and Ticker or Trading Symbol AMERICAN OUTDOOR BRANDS CORP | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|--|--|-----------------------------|---|---------|--|---------|--|------------------|--|---|---------------|----------------------------|-----------------------------------|--|---|---|--|--|--|
| <u> </u> | | | | | _ [A | [AOBC] | | | | | | | | | X | Director Officer (give title below) | | | 10% Owner Other (specify below) | |
| (Last) (First) (Middle) 2100 ROOSEVELT AVENUE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/19/2017 | | | | | | | | | | | | | | | | |
| (Street) SPRINGI | FIELD M | MA 01104 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (City) | (5 | tate) (| Zip) | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - Nor | n-Deriv | ative | Sec | curitie | s Acc | uired, | Dis | posed o | f, or | Ben | efici | ally (| Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/I | | | | Ex Day/Year) if a | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) d Of (D) (Instr. 3, 4 | | | and Secur Benef Owne | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | Code | v | Amount | 0 | (A) or (D) | Price | e Repor Transa (Instr. | | action(s) 3 and 4) | | | (Instr. 4) | |
| Common Stock | | | | 12/19 | 9/2017 | | | | S ⁽¹⁾ | | 3,802 | D \$13 | | \$13 | 3.97 8,526 | | 3,526 | | D | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| Derivative Conversion Security Conversion or Exercise (Month/Day/Year) if any | | 3A. Deem Execution if any (Month/Da | n Date, Transac Code (Ir | | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Pri Deriv Secu (Instr | ative rity | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ow For Dir or (I) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (A) (D) | | | Expiration Date | Title | or Nur of | ount nber ıres | | | | | | |

Explanation of Responses:

1. The shares were sold pursuant to a 10b5-1 Trading Plan dated December 12, 2017.

Remarks:

Robert J. Cicero, as attorney-

in-fact

** Signature of Reporting Person

Date

12/19/2017

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.