

CASTLE BRANDS INC

Reported by SPILLANE THOMAS

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 04/28/17 for the Period Ending 04/26/17

Address 122 EAST 42ND STREET

SUITE 4700

NEW YORK, NY 10168

Telephone 646-356-0200

CIK 0001311538

Symbol ROX

SIC Code 2080 - Beverages

Industry Distillers & Wineries

Sector Consumer Non-Cyclicals

Fiscal Year 03/31



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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 * | | | | | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|--|---------------------------------------|----------------------------------|----------|--------|---|------------------------------------|---------|---------------------------------|--------------|---------------|-----------------|---|---|---|-----------------------------|---|--|---------------------------------------|
| Spillane Thomas | | | | | Ca | Castle Brands Inc [ROX] | | | | | | | | | | | | |
| (Last) (First) (Middle) | | | | 3.] | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | | Director | | | | | | |
| | | | | | | | | | | | | | | XOfficer (give title below)Other (specify below) Senior Vice President | | | | |
| C/O CASTLE BRANDS INC., 122 E. 42 ST., SUITE 5000 | | | | | 2 | 4/26/2017 | | | | | | | Semor vice i | resident | | | | |
| (Street) | | | | 4.] | 4. If Amendment, Date Original Filed (MM/DD/YYYY) | | | | | | | Y) 6. Individual | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| NEW YORK, NY 10168 (City) (State) (Zip) | | | | | | | | | | | | | _ X _ Form filed by One Reporting Person _ Form filed by More than One Reporting Person | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1.Title of Security (Instr. 3) 2. Trans. D | | | Date | Execu | | 3. Trans. Co (Instr. 8) | de | or Disposed of (Instr. 3, 4 and | | (D) | red (A) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | | Ownership Form: Of Be | 7. Nature of Indirect Beneficial | | |
| | | | | | | | | Code | V | Amou | |) or O) | Price | | | | | Ownership (Instr. 4) |
| Common Stock 4/26/2017 | | | |)17 | , | | A | | 90000 (1) | 1 | 1 | \$0.00 | 333563 | | D | | | |
| | Table 2. Conversion | le II - Der 3. Trans. Date | 3A. Dee | med 4. | | | 5. Numb | | 6. D | ate Exer | cisable | and | 7. Title | and Amount of | | 9. Number of | 10. Ownership | 11. Nature |
| | or Exercise Price of Derivative | | Date, if | | | Acquired Disposed (Instr. 3, | | l (A) or l of (D) | 1 | | | | Deriva | tive Security 3 and 4) | Security | Securities Beneficially Owned | Form of Derivative Security: | Beneficial Ownership (Instr. 4) |
| | Security | | | | Code | v | (A) | (D) | Date | e rcisable | Expirat Date | ion | | Amount or Number of Shares | | Following Reported Transaction(s) (Instr. 4) | Direct (D) or Indirect (I) (Instr. 4) | |

Explanation of Responses:

(1) Restricted shares of common stock issued pursuant to the issuer's 2013 Incentive Compensation Plan, as amended. Restricted shares vest in four equal annual installments commencing on the first anniversary of the date of grant provided Mr. Spillane is then still an employee of the issuer, subject to earlier vesting upon his death or disability or a change of control of the issuer.

Reporting Owners

| Paparting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|-----------------------|-------|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| Spillane Thomas C/O CASTLE BRANDS INC. 122 E. 42 ST., SUITE 5000 NEW YORK, NY 10168 | | | Senior Vice President | | | | | |

Signatures

| /s/ Thomas Spillane | 4/28/2017 |
|----------------------------------|-----------|
| ** 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 control number.