## FORM 4

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

OMB APPROVAL										
OMB Number:	3235-0287									
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).

## 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

(Print or Type Responses)  1. Name and Address of Reporting Person * HILLENBRAND W AUGUST					2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last)	(Last) (First) (Middle)				Hillenbrand, Inc. [HI]  3. Date of Earliest Transaction (Month/Day/Year)								_X_ Director	r (give title below)		6 Owner er (specify below	/)	
B - 300 WINDING WAY SUITE 200 (Street)					02/11/2009								6 Individu	al or Joint/Gre	un Filing/Ch	1. A1:1:1- T:-	-)	
				4.	4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
BATESVILLE, IN 47006 (City) (State) (Zip)																		
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y		12	2A. Deemed 3. Transa					Non-Derivative Securities Acquisaction 4. Securities Acquired				of Securities I		. Nature				
		Date	ear) E	Execution Date,		c, if Code (Instr. 8)		(	(A) or Disposed (Instr. 3, 4 and 5		of (D)	Owned Following Reporte Transaction(s) (Instr. 3 and 4)		red (	Ownership Form: E Direct (D)	Indirect eneficial wnership nstr. 4)		
							(	Code	V	Amo		Price				Instr. 4)		
Reminder: Re	eport on a se	parate line for each	class of secu	rities be	eneficially	y owi	ned dire	ctly o	_	-								
									contai	ned	in this fo	rm are r	ot requir		nd unless th		174 (9-02)	
									_ form d	lispl	ays a cur	rently va	alid OMB	control num	ıber.			
			Table					•			l of, or Ben ertible secu	•	Owned					
Derivative Security (Instr. 3)	2. 3. Transaction Conversion or Exercise Price of Derivative		r) any	Date, if	4. Transaction Code (Instr. 8)				and Expiration Date (Month/Day/Year) of Unc			7. Title a of Unde Securitie (Instr. 3	es		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownershi Form of Derivative Security:	11. Nature of Indirec Beneficial Ownershij (Instr. 4)	
	Security													Direct (D) or Indirec (I) (Instr. 4)				
					Code	V	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Shares	er				
Restricted Stock Units (Deferred Stock	(1)	02/11/2009			A		4,794		(2)		(2)	Comm Stock	14/9	4 \$ 0	4,794	D		
Award 2/11/09)																		
Report	ing Ov	vners															1	
Director			Relationships															
		Director	10% Owner		Office	or Othe	er											
		00 X																
Signatı	ıres																	
Carol A. F	Roell As A	ttorney-in-Fact	for W Aug	ust H	illenbra	nd		(	02/13/20	009								

Date

## **Explanation of Responses:**

\*\*Signature of Reporting Person

- \* 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).
- (1) Conversion or Exercise Price of Derivative Securities is 1-for-1.
  - These stock units shall vest upon the reporting person's retirement from the Board of Directors of the Company. Delivery of these shares may not occur until the six-month
- (2) anniversary of the date of retirement in accordance with Internal Revenue Service Code Section 409A. Stock units are entitled to dividend equivalent rights, which accrue on dividend record dates.

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.