FORM 4

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

OMB APPROVAL
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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 Ty | pe Response | s) | | | | | | | | | | | | |
|---|---|-------------|--|--|--------------------|-------------|--|---------------------------|---|---|--------------------------------------|--------------------------------------|---|---|
| 1. Name and Address of Reporting Person * HENDERSON JAMES A | | | | 2. Issuer Name and Ticker or Trading Symbol Hillenbrand, Inc. [HI] | | | | | 4 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| , , | (Last) (First) (Middle) 228 RIVERSIDE | | 3. Date of Earlie 12/23/2010 | 3. Date of Earliest Transaction (Month/Day/Year) 12/23/2010 | | | | | Office | r (give title belo | ow) | Other (specify b | pelow) | |
| (Street) | | | 4. If Amendmen | 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 | | | | | |
| | BUS, IN 4 | | | | | | | | | | | | | |
| (City | ·) | (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. 8) | | 4. Securities Acquired (A or Disposed of (D) (Instr. 3, 4 and 5) | | red (A) | Beneficially Owned Following Reported Transaction(s) | | Following | Form: | 7. Nature of Indirect Beneficial |
| | | | | | Code | v | ' Amount | (A) or (D) F | Price | (Instr. 3 | and 4) | | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
| Common | Stock | | 12/23/2010 | | Р | | 1,000 | A \$ | .8592 | 11,000 | | | D | |
| | | | Table II - | Derivative Secur | | th uired | ontained in the form ding. The form ding. | in this for splays a o | m are curren eficiall | not requ tly valid | OMB conf | ormation spond unle trol numbe | ss | 1474 (9-02) |
| 1. Title of | 2. | 3. Transact | ion 3A. Deemed | · · · · · · · · · · · · · · · · · · · | 5. | - | . Date Exe | | | tle and | 8. Price of | 9. Number | of 10. | 11. Natur |
| Derivative Security | Conversion or Exercise Price of Derivative Security | Date | Execution D any | Transaction Code Year) (Instr. 8) | Number a | | nd Expiration Date Month/Day/Year) | | Amo Unde Secur | mount of aderlying curities astr. 3 and | Derivative Security (Instr. 5) | | Owners Form of Derivati Security Direct (or Indire | of Indirect Beneficia Ownershi (Instr. 4) |
| | | | | Code V | (A) (| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Reporting Owners

| D 4 0 N 4 | Relationships | | | | | |
|---|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| HENDERSON JAMES A 4228 RIVERSIDE COLUMBUS, IN 47203 | X | | | | | |

Signatures

| Carol A. Roell As Attorney-In-Fact for James A. Henderson | 12/27/2010 |
|---|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

- * 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.

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.