## FORM 4

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

OMB APPE	ROVAL
OMB Number:	3235-0287
Estimated average	burden
hours per response	0.5

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

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

1. Name and Address of Reporting Person \*

(Print or Type Responses)

RYAN KIMBERLY K

#### 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

2. Issuer Name and Ticker or Trading Symbol

Hillenbrand, Inc. [HI]

0112 211	) ΓESVILLE	(First) BOULEVARD		3. Date of 11/17/20	f Earliest T 016	ransacti	ion (Mont	h/Day/Y	ear)		X Officer (give		Vice Presid	ner (specify belo ent	w)
BATESV	ILLE, IN 4	(Street)	4	4. If Ame	ndment, D	ate Orig	ginal Filed	(Month/Da	//Year)		6. Individual or _X_ Form filed by 0 Form filed by N	One Reporting I	Person		e)
(City)		(State)	(Zip)			Table l	I - Non-D	erivative	Securiti	es Acquir	red, Disposed	of, or Benef	ficially Own	ed	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	5. Amount of S Owned Follow Transaction(s) (Instr. 3 and 4)	Securities Beneficially wing Reported		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				·	,	Cod	le V	Amoun	(A) or (D)	Price	or (I)			(Instr. 4)	
Common	Stock		11/17/2016			M	-	800	A	\$ 21.65	44,595.745		D		
Common	Stock		11/17/2016			S <u>(1</u>	)	800	D	\$ 34.9	43,795.745		D		
Common	Stock		11/18/2016			M	-	3,965	A	\$ 22.26	47,760.745		D		
Common	Stock		11/18/2016			S(1	J	3,965	D	\$ 34.9	43,795.745			D	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	te, if Code (Instr. 8)  Carrently valid OME  2 II - Derivative Securities Acquired, Disposed of, or Benef (e.g., puts, calls, warrants, options, convertible securities and Expiration Date (Month/Day/Year)  Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		7. Title	7. Title and Amount of Underlying Securities		9. Number Derivative	of 10. Owners	Benefici Ownersh (Instr. 4)				
	Security		(Wollin Bay, Tear)		(A) of Disport (Instruction)	or osed O) r. 3, 4,					3 and 4)	(Instr. 5)	Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Form o Derivat Security Direct ( or Indir	Benefici Ownersl (Instr. 4)
			(Monda/Bay/Tear)	Code	(A) of Disport (Instruction)	or osed 0) r. 3, 4, 5)	Date Exercisal	Ex	piration		Amount or Number of Shares	(Instr. 5)	Beneficially Owned Following Reported Transaction	Form o Derivat Security Direct ( or Indir	Benefici Ownersl (Instr. 4)
Employee Stock Option (Right to Buy)	Security	11/17/2016	(Montal Bay Tear)	Code	(A) of Disport (Instrant)	or osed (b) (r. 3, 4, 5) (D)		Ex ole Da	piration de	Title	Amount or Number of Shares	(Instr. 5)	Beneficially Owned Following Reported Transaction	Form o Derivat Security Direct ( or Indir a(s) (I) (Instr. 4	Benefici Ownersl (Instr. 4)

Relationships

Officer

Other

10%

Owner

Director

Reporting Owner Name / Address

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### **Signatures**

By Carol A. Roell As Attorney-In-Fact for Kimberly K. Ryan	11/21/2016
**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).
- (1) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by insider.

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.