FORM	4
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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).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

#### 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 Respons	ses)		•								
1. Name and Address of Reporting Person <sup>*</sup> LOUGHREY F JOSEPH			2. Issuer Name <b>and</b> Ticker or Trading Symbol Hillenbrand, Inc. [HI]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
ONE BATESVIL	(First) LE BLVD	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/03/2020				Officer (give title below)	Other (specify b	below)		
BATESVILLE, IN	(Street) N 47006		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)			Execution Date, if	Code (Instr. 8)	• • • • • • • • •		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership Form:	Beneficial Ownership	
				Code	v	Amount	or (D)	Price		(I) (Instr. 4)	(
Common Stock		03/03/2020		Р		10,000	А	\$ 22.23	30,000	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information

SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

10.	11.37.
	11. Nature
Ownership	of Indirect
Form of	Beneficial
Derivative	Ownership
Security:	(Instr. 4)
Direct (D)	
(I) (I)	
(Instr. 4)	
۷ ۱(s	y Form of Derivative Security: Direct (D) or Indirect (s) (I)

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LOUGHREY F JOSEPH ONE BATESVILLE BLVD BATESVILLE, IN 47006	Х						

### **Signatures**

/s/ Patricia C. Lecher, as Attorney-in-Fact for F. Joseph Loughrey 03/03/2020

\*\*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.