## FORM 4

## **UNITED STATES SECU**

Washington, D.C. 20549

JRITIES AND EXCHANGE COMMISSI
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OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

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0.5

(I) (Instr. 4)

D

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Golliher Steven R.					2. Issuer Name and Ticker or Trading Symbol HAIN CELESTIAL GROUP INC [ HAIN ]					(Che	ck all applic	cable) or	g Person(s) to Is	Owner		
	E HAIN CE	irst) ELESTIAL GRO T, 12TH FLOOI		3. Date of Earliest Transaction (Month/Day/Year) 10/25/2024							Officer (give title Other (specify below)  Global Ch Supply Chain Officer					
(Street) HOBOKEN NJ 07030  (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	Individual or Joint/Group Filing (Check Appli Line)     Form filed by One Reporting Person     Form filed by More than One Reportin Person				
		Tab	le I - Non-D	erivative S	ecurities Ac	quired,	Dis	osed o	f, or	Bene	ficially	/ Owned	t			
Date				Transaction te onth/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Yea	3. Transaction Code (Instr. 8)						5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
					Code	v	Amount		A) or D)	Price	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 10/25/						M <sup>(1)</sup>	(1)	6,472		A	(2)	50,581		D		
Common Stock 10/25/						F <sup>(3)</sup>		2,101		D	\$8.39	48,	,480	D		
		1			curities Acq lls, warrants							Owned				
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 (Month/Day/Yes	Code (Inst	n of	6. Date Ex Expiration (Month/Da	Date			int of	curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned	Ownershi Form: Direct (D) or Indirect	Beneficial Ownership t (Instr. 4)	

## **Explanation of Responses:**

Restricted

Security

1. On October 25, 2024, the Reporting Person had 6,472 restricted share units ("RSUs") vest, resulting in the Reporting Person receiving 6,472 shares of common stock of the Issuer prior to withholding for taxes

Date

Exercisable

(4)

Expiration

(4)

- 2. The RSUs represented a contingent right to receive shares of the Issuer's common stock upon vesting.
- 3. The Issuer withheld 2,101 shares of common stock to satisfy the tax withholding obligations in connection with the vesting of 6,472 RSUs, pursuant to the terms of the applicable award agreement.

(A) or Disposed of (D)

(Instr. 3, 4 and 5)

(A) (D)

 $4.\ Of\ the\ 19,418\ RSUs\ under\ this\ award,\ 6,472\ RSUs\ vested\ on\ October\ 25,\ 2024\ and\ 6,473\ RSUs\ vest\ on\ each\ of\ October\ 25,\ 2025\ and\ 2026.$ 

/s/ Andrew S. Burchill, as Attorney-in-Fact for Steven R. 10/29/2024 Golliher

\$<mark>0</mark>

Following Reported

(Instr. 4)

Transaction(s)

12,946

\*\* Signature of Reporting Person Date

Amount Number

Shares

6,472

of

(Instr. 3 and 4)

Title

Stock

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).

10/25/2024

\*\* 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 Number.