

# HILLENBRAND, INC. Reported by LUCCHESE CYNTHIA L

## FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 12/03/09 for the Period Ending 12/01/09

Address ONE BATESVILLE BOULEVARD

BATESVILLE, IN 47006

Telephone (812)931-2304

CIK 0001417398

Symbol HI

Fiscal Year 09/30





[ ] 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

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#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2.	2. Issuer Name <b>and</b> Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Lucchese Cyn	thia L			H	lille	nbran	<b>d,</b> ]	Inc. [	E	II]								
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)									Director 10% Owner			wner	
					12/1/2000									below)	/			
ONE BATESVILLE BOULEVARD															Senior Vice President & CFO			
(Street)														6. Individual or Joint/Group Filing (Check Applicable Line)				
BATESVILLI	E, IN 47	006																
(City) (State) (Zip)														X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table I	- Non-I	)eriv	ativ	e Secur	ities	: Acai	nir	ed. Di	sno	sed of	f. or 1	Beneficially	v Owned			
1.Title of Security 2.			2. Tra Date		2A. Deemed Execution Date, if	3. Co	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) Disposed of (I (Instr. 3, 4 and		or I D) (	5. Amount of Securi Following Reported (Instr. 3 and 4)		ies Beneficially Owned		Ownership Form: Direct (D)	Beneficial Ownership	
						any	(	Code	v .	Amount	(A) or (D)	Price					or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				12/1/	2009			A		<b>29232</b> (1)	A	\$0		6572	25 (1)		D	
Tabl	e II - Dei	ivative:	Securitie	es Be	nefi	cially O	wne	ed ( <i>e</i> .	g.	, puts,	cal	ls, wa	ırran	ts, options,	convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans.	3A. Deemed	4. Trans Code (Instr. 8)	D Se A D	. Number of Perivative and Expiration Date Securities Underly Derivative Securities (A) or Disposed of (D) (Instr. 3, 4 and 1)  Date Exercisable and Expiration Date Securities Underly Derivative Securities (Instr. 3 and 4)  Amount Amount Amount Securities (Instr. 3 and 4)		6. Date Exercisable and Expiration Date  7. Title and A Securities Un Derivative Se				ties Un tive Se	derlying curity	(Instr. 5) See Be Ov Fo Re	of derivative Securities Beneficially Owned Following Reported	10.	Beneficial	
				Code	v			mount or umber of ares	Transaction (s) (Instr. 4)		4)							
Employee Stock Option (Right to Buy)	\$18.53	12/1/2009		A		25984		12/1/20		12/1/2		Comm Stock		25984	\$0	25984	D	

#### **Explanation of Responses:**

- (1) Consists of unvested shares of Restricted Stock subject to vesting conditions based on the Company's financial performance.
- (2) The option vests in three equal annual installments beginning on the date indicated.

**Reporting Owners** 

Danastina Oversa Nama / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Lucchese Cynthia L ONE BATESVILLE BOULEVARD			Senior Vice President & CFO						
BATESVILLE, IN 47006									

Carol A. Roell As Attorney-In-Fact for Cynthia L. Lucchese

12/3/2009

\*\* Signature of Reporting Person

Date

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).
- \*\* 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 control number.