

[] 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

1. Name and Address of Reporting Person *					2. Issuer Name <b>and</b> Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
TRAINOR (	CHRIST	OPHER	Н	Н	iller	ıbran	d, Inc. [	НІ				(Check an ap)	pineadicy			
				3.	Date	of Ear	liest Trans	actio	on (MM	/DD/YYY	Y)	Director 10% Owner				
(Last) (First) (Middle)					Duite	or Eur	11000 110110		011 (11111	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- /	X Officer (give title below) Other (specify below)				
ONE BATESVILLE BOULEVARD							7/1	2/2	016			Senior Vice President				
(Street)				4.	If Ar	nendm	ent, Date (	Origi	inal Fil	ed (MM/I	OD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)				
BATESVILLE, IN 47006 (City) (State) (Zip)												X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(0	ity) (5ta	ite) (Zip	, <u>)</u>													
		,	Table I - N	lon-De	rivat	ive Sec	curities Ac	equi	red, D	isposed	of, or Be	neficially Own	ed			
1.Title of Security (Instr. 3)				Execu		3. Trans. Co (Instr. 8)	ode	or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form:	Beneficial	
						-	Code	V	Amour	(A) or (D)	Price				Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock 7/12/2016				/2016			M		1857	A	\$22.26		14075		D	
Common Stock 7/12/2016			/2016			S (1)		1857	D	\$32	12218		D			
Common Stock 7/12/2016			/2016			M		4647	A	\$20.675	16865			D		
Common Stock 7/12/2016			/2016		S (1)		4647	D	\$32	12218			D			
	Tab	le II - Deri	vative Sec	urities	Bene	eficially	y Owned (	e.g.	, puts	, calls, v	varrants,	options, conve	ertible sec	curities)	-	•
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date	3A. Deemed Execution Date, if any	4. Trans Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	
Employee Stock Option (Right to Buy)	\$22.26	7/12/2016		M			1857	12/6	5/2012	12/6/2021	Common Stock	1857	\$0	0	D	
Employee Stock Option (Right to Buy)	\$20.675	7/12/2016		М			4647	12/4	1/2013	12/4/2022	Common Stock	4647	\$0	0	D	

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

(1) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by insider.

### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
TRAINOR CHRISTOPHER H								
ONE BATESVILLE BOULEVARD			Senior Vice President					
BATESVILLE, IN 47006								

#### **Signatures**

Carol A. Roell as Attorney-In-Fact for Christopher H. Trainor

\*\*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.