FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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OMB APPROVAL									
OMB Number: 3235-0									
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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).

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* Bellairs Chris					2. Issuer Name and Ticker or Trading Symbol HAIN CELESTIAL GROUP INC [HAIN]								able)	g Perso	10% Ow Other (s	ner
(Last) (First) (Middle) C/O THE HAIN CELESTIAL GROUP, INC. 1111 MARCUS AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 09/08/2022						_ ′	below)	& Chief I	Financ	below)	r
(Street) LAKE SUCCESS (City)	NY (Sta	te) (2	1042 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Line) X Form filed by One Report Form filed by More than Operson							rting Person				
1. Title of Security (Instr. 3) 2. Trans Date			Transaction	Execution Date,		3. Transactio Code (Inst	4. Securi	urities Acquired (A) or ed Of (D) (Instr. 3, 4 a		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D) or Indirect (I) (Instr. 4)		. Nature of ndirect Beneficial Dwnership Instr. 4)		
		Т	able II - De (e.					uired, Disp , options,				Owned				
1. Title of Derivative Security 1. Title of Conversion or Exercise Price of Derivative Security 1. Title of Conversion or Exercise (Month/Day/Year) 2. Conversion Date (Month/Day/Year) 3. Transaction Date Execution Date if any (Month/Day/Year)		Code	action (Instr.	on of		6. Date Exercisable and Expiration Date (Month/Day/Year)		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 Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Restricted Share Units	(1)	09/08/2022		A		26,724		(2)	(2)	Common Stock	26,724	\$0	26,72	4	D	
Performance Share Units	(3)	09/08/2022		A		8,819		(4)	(4)	Common Stock	8,819(4)	\$0	8,819	9	D	

- $1. \ Each \ restricted \ share \ unit \ ("RSU") \ represents \ a \ contingent \ right \ to \ receive \ one \ share \ of \ the \ Issuer's \ common \ stock.$
- 2. The RSUs, awarded as part of the Issuer's 2023-2025 Long Term Incentive Program, vest in three (3) equal annual installments on September 6, 2023, 2024 and 2025.
- 3. Each performance share unit ("PSU") represents a contingent right to receive one share of the Issuer's common stock.
- 4. The PSUs, awarded as part of the Issuer's 2023-2025 Long Term Incentive Program, are subject to both performance and time vesting requirements. The number of PSUs reported represents the target number of PSUs. The number of PSUs that vest, if any, may vary from 0% to 200% of the target number reported, and is based on goals for the Issuer's compound annual total shareholder return over the three-year period from September 7, 2022 through September 6, 2025. The time vesting requirement will be satisfied on September 6, 2025.

Remarks:

/s/ Andrew Burchill, as Attorney-in-Fact for Chris

09/12/2022

Bellairs

** 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 Number.