FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPE | ROVAL |
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| | OMB Number: | 3235-0287 |
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| Check this box if | no longer subject to |
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| Section 16. Form | 1 4 or Form 5 |
| obligations may | continue. See |
| Instruction 1(h) | |

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* <u>FALTISCHEK DENISE M</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol HAIN CELESTIAL GROUP INC [HAIN] | | | | | | | | | Check all | nship of F applicab Director | ole) | Person(s) to Is | | |
|--|--|--|--|--------------------------------|---|--|-----|------------------|--|--------------------|---|---|----------------------|---|--|--|---|--|---|--|
| (Last) (First) (Middle) C/O THE HAIN CELESTIAL GROUP, INC. 58 SOUTH SERVICE ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/18/2011 | | | | | | | | | | elow) | | below peral Counse | | |
| (Street) MELVILLE NY 11747 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date | | n Date, | , Transaction Dispo Code (Instr. 5) | | Disposed | urities Acquired (A) sed Of (D) (Instr. 3, | | | nd Se Be Ov | Amount of curities eneficially vned Folle ported | , | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | nount (| | Price | , Tr∂ | ansaction str. 3 and | | | (111501.4) | | |
| Common Stock ⁽¹⁾ 11/18/ | | | | | | | | | | | 5,288 | | Α | \$ | 0 | 20,194 | | D | | |
| Common Stock 11/19/ | | | | | | | | | F | | 165 ⁽²⁾ | | D | \$35 | 5.38 | 8 20,029 | | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/Y | Date, Transactio Code (Inst | | | | | 6. Date Expirati (Month/ | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Price Derivati Security (Instr. 5 | ve deriv / Secu Bend Own Follo Repo | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | or | ount mber ares | er | | | | | | |

Explanation of Responses:

- 1. Represents a grant of restricted shares of the Issuer's common stock, half of which will vest on November 18, 2013, and half of which will vest on November 18, 2013, provided the Issuer achieves certain performance measures.
- 2. Represents the number of shares withheld to pay taxes incident to the vesting of restricted stock pursuant to the Restricted Stock Agreement between the Issuer and the reporting person.

Denise M. Faltischek

11/22/2011

** 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.