FORM 4

UNITED STATES SECU

Washington, D.C. 20549

RITIES AND EXCHANGE COMMISSION

OMB APF	PROVAL
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(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* <u>Golliher Steven R.</u>					r Name and Ticl N CELESTI				[HAIN] (Ch	eck all appli	cable) or	g Person(s) to Is)wner
(Last) (First) (Middle) C/O THE HAIN CELESTIAL GROUP, INC. 221 RIVER STREET, 12TH FLOOR (Street) HOBOKEN NJ 07030 (City) (State) (Zip)					3. Date of Earliest Transaction (Month/Day/Year) 11/18/2024 4. If Amendment, Date of Original Filed (Month/Day/Year)						below)	Officer (give title Other (specification) Global Ch Supply Chain Officer		
											6. Individual or Joint/Group Filing (Check Applic Line) Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tab	le I - Non-Dei	ivative Se	curities Ac	quired,	Dis	posed o	f, or Ber	neficial	ly Owne	t		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3)			Benefici Owned I	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code V Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)		
Common Stock 11/18/						M ⁽¹⁾	(1)	1,470	A	(2)	49,950		D	
Common Stock 11/18/						F ⁽³⁾		478	D	\$7.23	3 49	,472	D	
		1	able II - Deriv (e.g.,		urities Acqı İs, 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/Year	4. Transaction Code (Instr 8)	n of	6. Date Ex Expiration (Month/Da	Date		7. Title and Amount of Securities Underlying Derivative	Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned	Ownershi Form: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)

Explanation of Responses:

Restricted

Units

Security

1. On November 18, 2024, the Reporting Person had 1,470 restricted share units ("RSUs") vest, resulting in the Reporting Person receiving 1,470 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 478 shares of common stock to satisfy the tax withholding obligations in connection with the vesting of 1,470 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 4,414 RSUs under this award, 1,472 RSUs vested on each of November 18, 2022 and November 18, 2023, and 1,470 RSUs vested on November 18, 2024.

/s/ Andrew S. Burchill, as Attorney-in-Fact for Steven R. 11/20/2024 Golliher

\$<mark>0</mark>

Following Reported

(Instr. 4)

Transaction(s)

** Signature of Reporting Person Date

(Instr. 3 and 4)

Title

Stock

Amount Number

Shares

1,470

of

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).

11/18/2024

** 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.