FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APP	ROVAL						
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

MCGUINNESS MICHAEL B			Date of Event dequiring Staten Month/Day/Year 2/29/2016	nent		er Name and Ticker or Trac N CELESTIAL GE	<u>[С</u> [на	IN]			
(Last) (First) (Middle) C/O THE HAIN CELESTIAL GROUP, INC. 1111 MARCUS AVENUE					Relationship of Reporting Pers (Check all applicable) Director Officer (give title)		on(s) to Issuer 10% Owner Other (specify		5. If Amendment, Date of Original Filed (Month/Day/Year)		
					X	below) SVP & Chief Accounting	below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) LAKE SUCCESS	NY	11042									/ More than One
(City)	(State)	(Zip)									
		Т	able I - Non	-Derivati	ve S	ecurities Beneficiall	y Owned				
1. Title of Security (Instr. 4)					ınt of Securities ially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Secur Underlying Derivative Securi		ty (Instr. 4) Conv		sion (5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
								Price of Derivative Security			

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Michael B. McGuinness 03/08/2016

** Signature of Reporting Person Da

Data

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 5 (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.