Instruction 1(b).

FORM 4

Check this box if no longer subject

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

ashington,	D.C.	20549		
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STATEMENT	OF CHANG	GES IN BE	NEFICIAL	OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per response:	0.5									

to Section 16. Form 4 or Form 5 obligations may continue. See 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* BOSTAPH KARL R.					2. Issuer Name and Ticker or Trading Symbol ASHLAND INC. [ ASH ]									k all app Direc	licable)		rson(s) to Is  10% Over 15	wner	
(Last) 1845 BL	(Fir AZER DRI	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/17/2023						Λ	belov	SVP O	perati	below)				
(Street) WILMIN	NGTON DE	E 1	9808			Amend 7/202		Date o	of Original Filed (Month/Day/Year)					6. Indi Line) X	,				on
(City)	(Sta	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication							on '							
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											nded to								
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	enefi	cially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution Date,		Date,	3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)						ies ially Following	Form (D) o	rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code V		Amount	(A) o (D)	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)						
Common	Stock	Stock 11/17/			.023			A		412	A	\$7	\$76.9		5,681(1)		D		
Common	Stock			11/17/2	2023	3		F <sup>(2)</sup>		159	D	\$7	576.9 5,		522(1)		D		
Common	Stock			11/18/2	2023	3		M		247	A	\$7	8.32	5,	769(1)		D		
Common	Stock			11/18/2	2023			F <sup>(3)</sup>		95	D	\$7	8.32	5,674(1)			D		
		Tal									osed of, convertib				Owne	d			
1. Title of Derivative Conversion or Exercise Price of Derivative Security  1. Title of Conversion Date Date (Month/Day/Year)  2. Conversion Date Execution Date, if any (Month/Day/Year)					ansaction of ode (Instr. Derivative		Expiration Date (Month/Day/Year) S U D S			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares	r					

## Explanation of Responses:

- 1. Revised to correct the calculation of the final securities beneficially owned following the reported transactions.
- 2. Revised to correct the number of shares withheld in connection with the payment of tax liability incident to the vesting of Performance Share Units acquired pursuant to Ashland's incentive plan as approved by the shareholders and exempt pursuant to Rule 16b-3.
- 3. Payment of tax liability by withholding securities incident to the vesting of Restricted Stock Units, acquired pursuant to Ashland's incentive plan as approved by the shareholders and exempt pursuant to Rule 16b-3.

/s/ Serena S. Kenost, Attorney-in-Fact

12/07/2023

\*\* 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.