FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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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(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* KALYANA SWAMINATHAN ASHOK					2. Issuer Name and Ticker or Trading Symbol ASHLAND INC. [ASH]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title) Other (crocify)						
(Last) 8145 BL	(Fir AZER DRI	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 08/18/2023									X Officer (give title Other (specify below) Sr VP & Gen Mgr, Life Sciences						
(Street) WILMINGTON DE 19808 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year) Rule 10b5-1(c) Transaction Indication								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
Check this box to indicate that a transaction was made pursual satisfy the affirmative defense conditions of Rule 10b5-1(c). Se												uction or writt	ten pla	an that is inte	nded to					
		Table	I - No	n-Deriva	ative S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benefi	cially	/ Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				y/Year) Executio		ution Date,				es Acquired (A) Of (D) (Instr. 3, 4		4 and Secur Benet		cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) (D)	or Pric	e	Transa	action(s) . 3 and 4)			(111511. 4)		
Common Stock 08/18/2					2023			A ⁽¹⁾		2,030	A	. \$8	6.03	3,343			D			
Common Stock 08/18/2				2023			F ⁽²⁾		637	D	\$8	6.03	03 2,706 ⁽³⁾			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 1. Transaction Date (Month/Day/Year) 2. A. Deemed Execution Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 6. Month/Day/Year) 7. Month/Day/Year)			ion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Titl Amou Secur Under Derive Secur 3 and	int of ities rlying ative ity (Insti	Dei Ser (Ins	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
					Code V (A) (D)				Date Expirat Exercisable Date		Title Shar									

Explanation of Responses:

- $1.\ Vesting\ of\ non-derivative\ stock\ settled\ units\ exempted\ pursuant\ to\ Rule\ 16b-3.$
- 2. Payment of tax liability by withholding securities incident to the vesting of non-derivative Stock-Settled Performance Stock Units, acquired pursuant to the Ashland Global Holdings Inc. 2018 Omnibus Incentive Compensation Plan as approved by the shareholders and exempt pursuant to Rule 16b-3.
- 3. Amount accounts for the disposition of securities beneficially owned on account of the payment of a tax liability by withholding securities incident to the vesting of the non-derivative Performance

/s/ Robin E. Lampkin,

08/22/2023

Attoney-in-Fact

** 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.