FORM 4

Check this box if no longer subject Section 16. Form 4 or Form 5

obligations may continue. See

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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

1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol ASHLAND GLOBAL HOLDINGS INC [5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
MAIN SUE												X	Directo	or		10% Ov	vner			
(Last) (First) (Middle) 50. E. RIVERCENTER BLVD.					ASH] 3. Date of Earliest Transaction (Month/Day/Year) 02/08/2019										Officer below)	(give title		Other (s below)	specify	
(Street) COVINGTON KY 41011 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne) 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																			
						_			'		<u>. </u>							1		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						ar) E	2A. Deemed Execution Date, if any (Month/Day/Year		, Trans Code	Transaction Dispose Code (Instr. 5)		rities Acqui d Of (D) (In			5. Amou Securiti Benefici Owned I Reporte	es Formially (D) (Following (I) (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	nt (A) or (D)		rice	Transac (Instr. 3	ction(s)			(111311.4)	
	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)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			ate, T	1. Fransa Code (I		5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr.	tive ties red sed	Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)			d if is ig g e Secu nd 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				C	Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber						
Restricted Stock	(1)	02/08/2019			A		1,413		(2)	T	(2)	Common Stock	1,4	13	\$77.85	3,723 ⁽³	3)	D		

Explanation of Responses:

- 1. Each Restricted Stock Unit represents a right to receive one (1) share of Ashland Common Stock.
- 2. Grant of deferred Restricted Stock Units pursuant to Ashland's Deferred Compensation Plan for Non-Employee Directors, and exempt under Rule 16b-3. The Restricted Stock Units will vest one year after date of grant. (One (1) Restricted Stock Unit in the Deferred Compensation Plan for Non-Employee Directors is the equivalent of one (1) share of Ashland Common Stock.)
- 3. The balance includes 7 additional Restricted Stock Units acquired in lieu of cash dividends on March 15, 2018, 7 additional Restricted Stock Units acquired in lieu of cash dividends on June 15, 2018, 7 additional Restricted Stock Units acquired in lieu of cash dividends on September 15, 2018 and 8 additional Restricted Stock Units acquired in lieu of cash dividends on December 15, 2018, pursuant to Ashland's Deferred Compensation Plan for Non-Employee Directors, and exempt under Rule 16b-3.

/s/ Jennifer I. Henkel, 02/12/2019 Attorney-in-Fact

** Signature of Reporting Person

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.