## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

0.5

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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(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

|  |     | • | Fable II - Deri |                                      |   |   |  | uired, Dis                          |           | , or Ben   | eficially | Transact<br>(Instr. 3 a  |                          |   |   |
|--|-----|---|-----------------|--------------------------------------|---|---|--|-------------------------------------|-----------|--|-----------|--|--------------------------|---|---|
|  |     |   |                 |                                      |   |   |  |                                     |           |  |           | Transact   | ion(o)                   |   |   |
| 1. Title of Security (Instr. 3)                          |     |   | 2. Tr<br>Date   | 2. Transaction Date (Month/Day/Year) |   | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |  | Transaction Disp<br>Code (Instr. 5) |           | urities Acquired (A) or<br>sed Of (D) (Instr. 3, 4 a |           | 5. Amou<br>Securitie<br>Benefici<br>Owned I<br>Reporte   | nt of 6.9 Fo (D) (I) (I) | i. Ownership<br>form: Direct<br>D) or Indirect<br>I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
| (City)   | (Si |   | (Zip)           | rivetiv                              |   | witio o   |  | nuirod D                            | ionoood 4 | of or Po   | noficial  | Person   |                          |   |   |
| (Street) WILMINGTON DE 19808                             |     |   | 19808           | 4.                                   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                |   |  |                                     |           |  |           | 6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting |                          |   |   |
| (Last) (First) (Middle)<br>8145 BLAZER DRIVE             |     |   |                 | 11                                   | 3. Date of Earliest Transaction (Month/Day/Year) 11/13/2024             |   |  |                                     |           |  |           | Officer (give title Other (specify below) below)  Chair of the Board and CEO   |                          |   |   |
| Name and Address of Reporting Person*     NOVO GUILLERMO |     |   |                 |                                      | 2. Issuer Name <b>and</b> Ticker or Trading Symbol ASHLAND INC. [ ASH ] |   |  |                                     |           |  |           | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Uniform 10% Owner   |                          |   |   |

## **Explanation of Responses:**

- 1. Each Restricted Stock Unit (RSU) represents a right to receive one (1) share of Ashland common stock upon vesting.
- 2. Grant of Restricted Stock Units on November 13, 2024, pursuant to Ashland's incentive plan as approved by the shareholders and exempt pursuant to Rule 16b-3. The shares in this grant vest in three equal installments beginning one year from the date of grant, provided that the Reporting Person remains in continuous employment with the Issuer

/s/ Serena S. Kenost, Attorneyin-fact for Guillermo Novo

11/15/2024

\*\* 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.