FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average	burden								

0.5

hours per response:

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

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

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).
detense conditions of Rule 1005-1(c).

See iiis	struction 10.																	
1. Name and Address of Reporting Person* <u>Bishop Steven D</u>					2. Issuer Name and Ticker or Trading Symbol ASHLAND INC. [ASH]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Distiop	Steven.	<u>U</u>						-					1	Directo	or		10% Ow	mer
(Last) (First) (Middle) 8145 BLAZER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2024									Officer below)	(give title		Other (s below)	pecify
				4. 1	f Ame	ndmen	t, Date	of Original Fi	iled (Month/D	ay/Year)			dual or .	Joint/Group	o Filing	g (Check Ap	plicable
(Street) WILMIN	IGTON I	D E	19808									Lir	ie) ✓	Form f	iled by Mo		orting Perso	
(City) (State) (Zip)					Person													
		Tab	le I - Non-De	rivative	e Sec	curiti	es Ac	quired, D	isp	osed o	of, or Be	neficia	lly C	wnec	t			
1. Title of S	nsaction th/Day/Ye	Execution Date,			3. 4. Securities Acquired (A) Transaction Disposed Of (D) (Instr. 3, 4 t) 8) 5)			ed (A) or str. 3, 4 an	4 and Securitie Benefici Owned F		es Fo ally (D Following (I)		rm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	<i>'</i>	Amount	(A) or (D) Prid		⊺	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)
		Т	able II - Deri					uired, Dis , options					y Ov	vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security 3. Transacti Date (Month/Day/		3A. Deemed Execution Date, if any (Month/Day/Year	Date, Transac Code (Ir				6. Date Exerc Expiration D (Month/Day/	ate		and 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v			Date Exercisable	Exp Dat	piration te	Title	Amount or Number of Shares						
Common Stock Units	(1)	12/31/2024		A ⁽²⁾		350		(3)		(3)	Common Stock	350	\$7	71.46	2,843 ⁽⁴	4)	D	

Explanation of Responses:

- 1 1 for 1
- 2. Common Stock Units acquired pursuant to Ashland's Deferred Compensation Plan for Non-Employee Directors (the "Plan") and exempt under Rule 16b-3. (One (1) Common Stock Unit in the Plan is the equivalent of one (1) share of Ashland Common Stock.)
- 3. Subject to any deferral election on timing of distribution by the reporting person under the Plan, the Common Stock Units are payable in Common Stock upon the reporting person's separation from service as a director.
- 4. Balance includes additional Common Stock Units acquired in lieu of cash dividends.

/s/ Serena S. Kenost, Attorney-01/02/2025 in-fact for Steven D. Bishop

** 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.