FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1	OIVID AFFROVAL										
	OMB Number:	3235-0287									
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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).

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

Name and Address of Reporting Person*  MUSA OSAMA M  (Last) (First) (Middle)							2. Issuer Name and Ticker or Trading Symbol ASHLAND GLOBAL HOLDINGS INC [ ASH ]								Reporting ble) give title	Perso	10% Ow Other (s below)	ner
1005 ROUTE 202/206							3. Date of Earliest Transaction (Month/Day/Year) 11/13/2019								Sr. Vice	Presid	lent	
(Street) BRIDGEWATER NJ 08807					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								dividual or Joint/Group Filing (Check Applicable ) X Form filed by One Reporting Person Form filed by More than One Reporting				
(City) (State) (Zip)													Person					
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D						action 2A. Deemed Execution Date			3. Transaction Code (Instr.		4. Securities Disposed O	S Acquired (	(A) or	5. Amount Securities Beneficiall Owned Fo Reported	ly	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
								Code	,	Amount	(A) or (D)	Price	Transactio (Instr. 3 an				Instr. 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	4. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	ve es ially ng d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	V	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares					
Stock Appreciation Right	\$77.9	11/13/2019			A		12,200		11/13/2020 <sup>(1</sup>	) 1	1/13/2029 <sup>(1)</sup>	Common Stock	12,200	\$0	12,20	0	D	
Restricted Stock Units	(2)	11/13/2019			A		2,450		(3)		(3)	Common Stock	2,450	\$77.9	11,832	(4)	D	

## **Explanation of Responses:**

- 1. Stock Appreciation Right granted pursuant to Ashland's incentive plan which vests in three annual installments: 50% after the first year, the next 25% the second year and the remaining 25% the third year.
- 2. Each Restricted Stock Unit represents a right to receive one (1) share of Ashland Common Stock.
- 3. Grant of Restricted Stock Units, pursuant to Ashland's incentive plan as approved by the shareholders and exempt pursuant to Rule 16b-3. The shares in this grant will vest in three equal annual installments beginning one year from the date of grant, provided that the Reporting Person remains in continuous employment with the Issuer.
- 4. Balance includes 69 additional Restricted Stock Units acquired in lieu of cash dividends (34 on June 15, 2019 and 35 on September 15, 2019). The total includes prior awards that have different vesting and expiration dates.

/s/ Jennifer I. Henkel, Attorneyin-Fact 11/14/2019

\*\* 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.