FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Expires: December 31, 2014

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

| Name and Address of Reporting Person* EDELCUP NORMAN S | | | | | | 2. Issuer Name and Ticker or Trading Symbol VALHI INC /DE/ [VHI] | | | | | | | | | heck all a _l | nip of Reporti oplicable) ector | ng Pers | on(s) to 1 | |
|--|--|---------|------|---|-----------------------------------|--|--|----------------------------------|--|---|--------|--|-------------|--------------|---|--|------------------------------------|--|--|
| (Last) | (Fir | , | | 3. Date of Earliest Transaction (Month/Day/Year) 05/28/2009 | | | | | | | | | | Off bel | cer (give title ow) | | Other (specify below) | | |
| 5430 LBJ FREEWAY, SUITE 1700 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) | | | | | | | | | | | | | | | X Form filed by One Reporting Person | | | | |
| DALLAS TX 75240 | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | |
| (City) | (Sta | ate) (Z | Zip) | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution Date | | | Date, | Transaction Dispose Code (Instr. and 5) | | | rities Acquired (A ed Of (D) (Instr. 3, | | | Secu Bend Own | mount of rities eficially ed owing | | ct (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | | A) or O) | Price | Repo | orted saction(s) r. 3 and 4) | (iiisu. | 7) | (mau. 1) |
| Common stock, \$0.01 par value per share 05/28/2 | | | | | | 009 | | | A ⁽¹⁾ | | 1,000 |) | Α | (1 |) | 39,000 | | 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) | ivative Conversion Date Execution Date urity or Exercise (Month/Day/Year) if any | | | on Date, | Transaction Code (Instr. 8) | | 5. Nu of Deriv Secur Acqu (A) or Dispo of (D) (Instr | ative rities ired rosed | 6. Date Exercisable at Expiration Date (Month/Day/Year) Date Expiration Expiration Date Expiration Date Expiration Date Expiration Date | | | Amount of Securities Underlying Derivative Security (Instr 3 and 4) | | ount nber | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative 9 Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ow Fo Dir or (I) 4) | rnership rm: rect (D) Indirect (Instr. | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. Shares issued for no cash consideration to nonemployee directors under the Valhi, Inc. 1997 Long-Term Incentive Plan.

Remarks:

A. Andrew R. Louis, Attorneyin-fact, for Norman S. Edelcup 05/28/2009

** 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.