Instruction 1(b).

FORM 4

Check this box if no longer subject

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, I | D.C. 20549 |
|---------------|------------|
|---------------|------------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|--|
|                          |           |  |  |  |  |  |  |  |  |  |  |
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |  |  |  |
| hours per response       | . 05      |  |  |  |  |  |  |  |  |  |  |

to Section 16. Form 4 or Form 5 obligations may continue. See 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*     MCILROY W HAYDEN |  |          |   |  | 2. Issuer Name and Ticker or Trading Symbol VALHI INC /DE/ [ VHI ] |  |  |                         |   |       |  |   |  | Relationshipheck all app                                    | ,  | ng Per   | rson(s) to Is                       |   |            |
|--|--|----------|---|--|--|--|--|-------------------------|---|-------|--|---|--|---|--|--|-------------------------------------|---|------------|
| (Last)   | (Fir   | st) (N   | Middle)                                 |  | 3. Date of Earliest Transaction (Month/Day/Year) 05/23/2024        |  |  |                         |   |       |  |   |  | Office<br>below   | er (give title<br>v)   |  | Other (s<br>below)                  | specify   |            |
| 5430 LBJ FREEWAY, SUITE 1700                               |  |          |   |  | 4. If A  | 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                                     |  |                                     |   |            |
| DALLA  | S TX   | TX 75240 |   |  |  |  |  |                         |   |       |  |   |  |   | Form filed by More than One Reporting Person                             |  |                                     |   |            |
| (City) (State) (Zip)                                       |  |          |   |  |  | Rule 10b5-1(c) Transaction Indication  |  |                         |   |       |  |   |  |   |  |  |                                     |   |            |
|  |  |          |   |  |  | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |  |                         |   |       |  |   |  |   |  |  |                                     |   |            |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |          |   |  |  |  |  |                         |   |       |  |   |  |   |  |  |                                     |   |            |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da |  |          |   |  | Exec<br>ay/Year) if any  |  | Deemed<br>cution Date,<br>y<br>nth/Day/Year)                   |                         | Transaction Disposed Code (Instr. 5)  |       | es Acquired (A)<br>Of (D) (Instr. 3, 4 |   | I (A) or<br>. 3, 4 a   | nd Securi<br>Benefi<br>Owned                                | ties<br>cially<br>I Following  | Form<br>(D) o  | n: Direct<br>r Indirect<br>istr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |            |
|  |  |          |   |  |  |  |  |                         | Code  | v     | Amount                                 | (A)<br>(D)  | ) or<br>)  | Price   | Transa   | ported<br>nsaction(s)<br>str. 3 and 4)                             |                                     |   | (Instr. 4) |
| Common stock, \$0.01 par value per share 05/23/2           |  |          |   |  | 2024   |  |  | <b>A</b> <sup>(1)</sup> |   | 1,050 | 4                                      | A   | (1)  | 8   | ,199   |  | D                                   |   |            |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |          |   |  |  |  |  |                         |   |       |  |   |  |   |  |  |                                     |   |            |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)        | erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any  |          | 4.<br>Transaction<br>Code (Instr.<br>8) |  | of   |  | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                         | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>3 and 4) |       | f<br>g                                 | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | у   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                     |   |            |
|  |  |          |   |  | Code V   |  | (A)  | (D)                     | Date<br>Exercisa  | able  | Expiration<br>Date                     | on Title Amou                                       |  | mber  |  |  |                                     |   |            |

## **Explanation of Responses:**

1. Shares issued for no cash consideration to directors under the Valhi, Inc. 2021 Non-Employee Director Stock Plan.

Jane R. Grimm, Attorney-infact, for W. Hayden McIlroy

05/24/2024

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.