FORM 4

☐ 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 that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer				
Tesija Kathi	ryn A			C	LO	ROX C	CO /D	E/ [CLX]		(Check all app	olicable)			
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)						X_ Director 10% Owner Officer (give title below) Other (specify below)					
1221 BROADWAY					3/28/2024											
	(Str	reet)		4.	IfA	mendmen	nt, Date	Orig	ginal Fi	led (MM/D	D/YYYY)	6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)
OAKLAND	, CA 946	12-1888										X Form filed by				
(City) (State) (Zip)											Form filed by	Form filed by More than One Reporting Person				
			Table I - N	Non-De	riva	tive Secu	rities A	cqu	ired, D	isposed o	of, or Be	neficially Owne	d			
1. Title of Security (Instr. 3) 2. Trans. D			rans. Date	Exe		3. Trans. Cod (Instr. 8)		or Disposed of (D)				llowing Reported Transaction(s) Ownership of Indi str. 3 and 4) Ownership benefit benefit ownership of Indi Benefit Owner Str. 5 and 4)			Beneficial Ownership	
							Code	7	V Amo	(A) o unt (D)	r Price				or Indirect (I) (Instr. 4)	(Instr. 4)
	Tal	ble II - Der	rivative Sec	curities	Ben	neficially	Owned	l (<i>e.g</i>	g., puts	, calls, wa	arrants,	options, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Securiti Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following		11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	V	V (A)	(D	Da Ex	ate xercisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect	
Deferred Stock Units	(1)	2/9/2024		A (2)	V	47.68	828		<u>(3)</u>	<u>(3)</u>	Common Stock	47.6828	\$0	6,135.1878	D	
Deferred Stock Units	(1)	3/28/2024		A (4)		171.4	454		<u>(3)</u>	(3)	Common Stock	171.4454	\$0	6,306.6332	D	

Explanation of Responses:

- (1) 1-for-1
- (2) Deferred Stock Units acquired through dividend reinvestment during the fiscal year pursuant to the Independent Directors' Deferred Compensation Plan.
- (3) The Deferred Stock Units will be settled 100% in Clorox stock in connection with the reporting person's retirement or other termination of service as a Director.
- (4) Receipt of Deferred Stock Units in lieu of receipt of quarterly director's fees.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Tesija Kathryn A								
1221 BROADWAY	X							
OAKLAND, CA 94612-1888								

Signatures

By Cheryl Brice, Attorney-in-Fact for

4/2/2024

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 control number.