

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

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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 (Check all applicable)			
O'Daniel Julie Marie					VA	VALVOLINE INC [VVV]											
(Last) (First) (Middle)				3. I	Date	of Earl	iest Transa	ectio	n (MM/I	DD/YYYY	Director						
														X Officer (give title below) Other (specify below) CLO and Corp. Secy			
100 VALVOLINE WAY						8/12/2022							CLO and Co	rp. secy			
(Street)					4. I	4. If Amendment, Date Original Filed (MM/DD/YYYY)						Y) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
LEXINGTON, KY 40509 (City) (State) (Zip)													X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(C	ity) (Stai	te) (Zij	•	I - Non-	-Der	ivati	ve Sec	urities Ac	quir	ed, Dis	posed o	f, or I	Beneficially Owne	ed			
1. Title of Security (Instr. 3)				ate 2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	de	e 4. Securities Acqu or Disposed of (D) (Instr. 3, 4 and 5)			Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D)	Ownership of Indirect Form: Beneficial			
								Code	V	Amoun	(A) or (D)	Price				(I) (Instr. 4)	(
Common Stock 8/12/202				22			S		6500	D	\$29.90	8	13760				
Common Stock														3011		I	By 401(k) Plan
	Tab	le II - Der	·ivative	Securi	ties]	Bene	eficially	Owned (e.g.,	puts, o	calls, wa	rrant	s, options, conve	rtible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date E	3A. Dee Execution Date, if	cution (Ins		Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		and	6. Date Exercisable and Expiration Date		Securi Deriva (Instr.	e and Amount of ties Underlying tive Security 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				(Code	v	(A)	(D)	Dat Exe	te ercisable	Expiration Date		Amount or Number of Shares		Transaction(s) (Instr. 4)	(I) (Instr. 4)	

Explanation of Responses:

Reporting Owners

Panarting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
O'Daniel Julie Marie							
100 VALVOLINE WAY			CLO and Corp. Secy				
LEXINGTON, KY 40509							

Signatures

/s/ Ian C. Lofwall, Attorney-in-Fact	8/15/2022		
**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 control number.