| SEC Form 4 |  |
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## FORM 4

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 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            |   |   |  |   |               |  |
|--|---------|---------------------------------------|---|--|--|--------------|---|---|--|---|---------------|--|
| 1. Name and Address of Reporting Person <sup>*</sup><br>Ash Darron K |         |                                       |   | 2. Issuer Name and Ticker or Trading Symbol<br><u>CSW INDUSTRIALS, INC.</u> [ CSWI ]   |  |              |   |   | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable) |   |               |  |
| (Last)   | (First) | (Middle)                              | 3. Date<br>08/15  | e of Earliest Transa<br>/2024  | ction (Month/I   | Day/Year)    |   |   | Officer (give title below)   | Other<br>below  | (specify<br>) |  |
| 5420 LYNDON B. JOHNSON FWY., SUITE 500                               |         |                                       | 500 4. If An  | nendment, Date of  | Original Filed   | (Month/Day/Y | 6. Individual or Joint/Group Filing (Check Applicable Line) |   |  |   |               |  |
| (Street)   |         |                                       |   |  |  |              |   | 1   | Form filed by On   | e Reporting Per   | son           |  |
| DALLAS   | ТХ      | 75240                                 |   |  |  |              |   |   | Form filed by Mo<br>Person   | re than One Re  | porting       |  |
| (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-D                       | Derivative Se   | ecurities Acqu   | uired, Disp  | oosed of, o  | r Bene  | eficially   | Owned  |   |               |  |
| Date   |         | Transaction<br>ate<br>Ionth/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 3.<br>Transaction<br>Code (Instr.<br>8)  | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5) |              |   | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)          | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |               |  |

|              | Date<br>(Month/Day/Year) | Execution Date,<br>if any<br>(Month/Day/Year) | Code ( |   | Disposed Of (D) (Instr. 3, 4 and<br>5) |               |                           | Securities<br>Beneficially<br>Owned Following<br>Reported | (D) or Indirect | of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|--------------|--------------------------|---|--------|---|--|---------------|---------------------------|---|-----------------|--|
|              |                          |   | Code   | v | Amount                                 | (A) or<br>(D) | Price                     | Transaction(s)<br>(Instr. 3 and 4)                        |                 | (1150.4)   |
| Common Stock | 08/15/2024               |   | A      |   | 360                                    | Α             | <b>\$0</b> <sup>(1)</sup> | 360   | D               |  |
|              |                          |   |        |   |  |               |                           |   |                 |  |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

## 1. Title of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and 8. Price of 9. Number of 10. 11. Nature 2 Date Transaction Code (Instr. Expiration Date (Month/Day/Year) Derivative Conversion Execution Date Amount of Derivative derivative Ownership of Indirect or Exercise (Month/Day/Year) if any Derivative Security Securities Security Securities Form: Beneficial Direct (D) or Indirect (I) (Instr. 4) (Instr. 3) Price of Derivative (Month/Day/Year) 8) Securities Underlying Derivative (Instr. 5) Beneficially Ownership Acquired Owned (Instr. 4) Security (Instr. 3 and 4) Security (A) or Following Disposed of (D) (Instr. 3, 4 Reported Transaction(s) (Instr. 4) and 5) Amount or Number Date Expiration Shares Code v (A) (D) Exercisable Date Title

Explanation of Responses:

1. Represents shares of restricted common stock granted to the reporting person pursuant to the issuer's Equity and Incentive Compensation Plan. The shares cliff vest on the earlier of (i) the first anniversary of the grant or (ii) the date of the issuer's 2025 annual meeting of shareholders.

Remarks:

## /s/Luke E. Alverson, Attorney 08/16/2024

<u>in Fact</u>

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.