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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1(0). 30 | ee Instruction 1 | U | | | | | | | | | | | | | | | |
|--|---|--|---|----------|--|-------|---|---|--------|--|---|--------------------------------------|---|--|--|--|---------------------------------------|
| 1. Name and Address of Reporting Person* Sullivan Don | | | | | 2. Issuer Name and Ticker or Trading Symbol CSW INDUSTRIALS, INC. [CSWI] | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | |
| | | | | | | | | | | | | | | | er (give title | | % Owner ner (specify |
| (Last) (First) (Middle) | | | | | Date of Earliest Transaction (Month/Day/Year) | | | | | | | | 1 | belov | | | ow) |
| 5420 LBJ FREEWAY | | | | | 12/16/2024 | | | | | | | | | EV | P, Chief S | trategy Of | icer |
| | | 1 | | | | | | | | | | | | | | | |
| SUITE 500 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | |
| (Street) | | | | | . Il ranchament, bate of original Field (Month Day/Teal) | | | | | | | | Line) | | | | |
| DALLAS TX 75240 | | | | | - | | | | | | | | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | | | | | | | | | | | | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secui | rities Ac | quirec | d, Dis | posed of | , or B | enefi | cially | Own | ed | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day) | | | | | Execution Date, | | | | | es Acquired (A) Of (D) (Instr. 3, 4 | | and Securit | | ties cially I Following | 6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4) | of Indirect Ct Beneficial Ownershi | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | e | Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) |
| Common Stock 12/16/20 | | | | |)24 | | S ⁽¹⁾ | | 1,965 | D | \$38 | 37.15 | 3 | 0,804 | D | | |
| Common Stock | | | | | | | | | | | | | | 1,801 | | I | by ESOP |
| | | Tal | ole II - | | | | | | | osed of, convertib | | | | Owne | d | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 6. Date Exerc Expiration Da (Month/Day/\) | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | Der Sec (Ins | rice of ivative curity tr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owner Form: Direct or Indi (I) (Inst | D) Benefic Owners ect (Instr. 4 |
| | | | | | Code | v | (A) (D) | Date Exerc | isable | Expiration Date | Title | Amoun or Numbe of Shares | r | | | | |

Explanation of Responses:

1. The transaction reported was effected pursuant to a 10b5-1 trading plan established by the reporting person on September 13, 2024.

Remarks:

/s/Luke E. Alverson, Attorney in Fact

12/16/2024

** 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.