# FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### 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

(11mt of 1y	pe Response	s)													
1. Name and Address of Reporting Person* Barksdale Brian K				2. Issuer Name and Ticker or Trading Symbol MUELLER INDUSTRIES INC [MLI]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
`	(Last) (First) (Middle) 8724 SOUTHWIND DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 07/30/2019						X Officer (give title below) Other (specify below)  VP - Marketing					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person					
MEMPHIS, TN 38125 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqu						Acquir	uired, Disposed of, or Beneficially Owned				
1.Title of S (Instr. 3)	· · · · · · · · · · · · · · · · · · ·			2A. Deemed Execution Date, if any		(Instr. 8)					Beneficia Reported	t of Securities ly Owned Following Fransaction(s)		6. Ownership Form:	Beneficial
				(Month/Day/Yo	ear)	Code	V	Amoun	(A) or (D)	Price	(Instr. 3 a	ad 4)		` /	Ownership (Instr. 4)
Common Stock			07/30/2019			F		292	111	\$ 30.37	40,656			D	
Reminder:	Report on a s	separate line for	each class of secur	rities beneficiall	y ow	ned dire	Per	sons wh	o respo			ction of inf			1474 (9-02)
Reminder:	Report on a s	separate line for	Table II -	Derivative Secu	ıritie	es Acqu	Per con the	sons whatained in form dis	no respo n this fo splays a	rm are curren neficiall	not requ tly valid	uired to res	formation spond unle trol numbe	ss	1474 (9-02)
1. Title of Derivative Security		3. Transaction Date (Month/Day/Y	Table II -  3A. Deemed Execution Da any		sylvania syl	es Acqu rrants, o	Per con the red, I option 6. I and (M. de s	sons whatained in form dis	no respo n this fo splays a of, or Ber tible secu cisable on Date	rm are curren neficially rities) 7. Tit Amore Unde Secure	not required to the and count of erlying	OMB con 8. Price of	spond unle	of 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)

### **Reporting Owners**

B # 0 Y /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Barksdale Brian K 8724 SOUTHWIND DRIVE MEMPHIS, TN 38125			VP - Marketing				

# **Signatures**

Anthony J. Steinriede, Attorney-in-Fact	08/01/2019
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.