FORM 4

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

OMB APPROVAL
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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

(Print or Type Responses) 1. Name and Address of Reporting Person * GOLDMAN SCOTT JAY			2. Issuer Name and Ticker or Trading Symbol MUELLER INDUSTRIES INC [MLI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director Officer (give title below) Other (specify below)				
(Last) (First) (Middle) 3541 CORDOVA DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 04/01/2021										
(Street) CALABASAS, CA 91302			4. If Amendment, Date Original Filed(Month/Day/Year)					-	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned					Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	(Instr. 8)	(A	(A) or Disposed of (Instr. 3, 4 and 5)		(D) Beneficia Reported		nt of Securities ally Owned Following Transaction(s)		6. Ownership Form:	Beneficial
			(Month/Day/Year)	Code	VA	mount	(A) or (D) I	Price	(Instr. 3 ar	na 4)	oı (I	or Indirect	Ownership (Instr. 4)
Common Stock		04/01/2021		G	1	00	D S	0 8	15,000			D	
Reminder: Report on	a separate line fo	or each class of secur	ities beneficially ow		Person contair	s who	respond	n are	not requ		formation spond unlest trol number	ss	1474 (9-02)
Reminder: Report on	a separate line fo	Table II - 1	Derivative Securiti	es Acquire	Person contair the for	s who ned in m disp	respond this form plays a c	n are urrer ficiall	not requ ntly valid	ired to res	spond unles	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3) 2. Conversion of Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Table II - 1 (n 3A. Deemed Execution Da Year)	Derivative Securities, puts, calls, wa 4. te, if Transaction Code (Instr. 8)	es Acquire rrants, op	Person contair the form ed, Dispo tions, con 6. Date and Exp (Month	ns who ned in the m disp osed of onvertible Exercise	respond this form plays a c , or Bene- ble securi sable	ficiall ties) 7. Ti Amo Unde Secu	not requ ntly valid	OMB cont	spond unles	f 10. Ownersi Form of Derivati Security Direct (or Indire	11. Nation of Indirection Benefic Owners: (Instr. 4
1. Title of Derivative Security (Instr. 3) 2. Conversion of Exercise Price of Derivative	3. Transaction Date (Month/Day/	Table II - 1 (n 3A. Deemed Execution Da Year)	Derivative Securities, puts, calls, wa 4. te, if Transaction Code (arear) (Instr. 8)	es Acquire rrants, opt 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	Person contair the form ed, Dispo tions, con 6. Date and Exp (Month	as who ned in a m disp osed of, onvertil Exercis piration //Day/Y	respond this form plays a c , or Bene- ble securi sable	n are urrer ficiall ties) 7. Ti Amo Undd Secu (Insti 4)	not requently valid by Owned tle and bunt of erlying prities	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(f 10. Owners: Form of Derivati Security Direct (i or Indirects)	11. Nation of Indirection Benefic Owners: (Instr. 4

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
GOLDMAN SCOTT JAY 3541 CORDOVA DRIVE CALABASAS, CA 91302	X					

Signatures

Anthony Steinriede, Attorney-in-Fact	04/05/2021
**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.