Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| ashington, | D.C. | 20549 | |
|------------|------|-------|--|
| | | | |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

| 1. Name and Address of Reporting Person* <u>Haughie Alan</u> | | | | 2. Issuer Name and Ticker or Trading Symbol LOUISIANA-PACIFIC CORP [LPX] | | | | | | | | (Che | ck all app Direc | ationship of Reporti (all applicable) Director Officer (give title | | rson(s) to Is 10% Ov Other (s |)wner | | | |
|--|--|--------|----|--|--|---|--|--------------------------------|--|-------------------------|--|---------------------------------------|--|--|--|---|---|---------------------------------------|--|------------|
| (Last) 1610 WE | (F EST END | First) | , | /liddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 02/12/2024 | | | | | | X | | below) EVP, | | below) | вреспу | | | |
| SUITE 200 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line) | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | | |
| (Street) NASHVILLE TN 37203 | | | | | | | | | | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) | (\$ | State) | (Z | ľip) | | 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. | | | | | | | | | | nded to | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | Execution Date | | ate, | Transaction Disposed C Code (Instr. 5) | | es Acquired (A) Of (D) (Instr. 3, 4 | | | Securit Benefi | ities Folicially (Displaying (| | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Transa | action(s) 3 and 4) | | | (Instr. 4) |
| Common | Stock | | | | 02/12/2 | .024 | | A | | 11,076 ⁽¹⁾ A | | | \$0 | 108,784 | | | D | | | |
| Common Stock 02/12/2 | | | | 2024 | | | F | | 5,811 | D | 9 9 | 70.93 | 0.93 102,973 | | 73 D | | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | ive Conversion Date y or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | of | r osed (1. 3, 4 | Expiration Day/\(\frac{1}{2}\) | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | Str. | Price of erivative ecurity estr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | | | Code | v | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amor or Numl of Share | per | | | | | |

Explanation of Responses:

1. Reflects payout of 2021 performance stock units at 100% of target award and includes shares credited as dividend equivalents.

/s/Nicole Daniel, Attorney in 02/14/2024 **Fact**

** 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.