Edgar Filing: ASHLAND INC. - Form 4

ASHLAND Form 4	INC.									
September 1								OMB AF	PROVAL	
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287	
Check th if no long	aor				~~ .			Expires:	January 31 2005	
subject to Section 1 Form 4 c	or SIAIE N 16.		F CHANGES IN BENEFICIAL OWNERS SECURITIES					Estimated a burden hou response	iverage	
Form 5 obligatio may cont <i>See</i> Instr 1(b).	tinue. Section 17(a	suant to Section a) of the Public 30(h) of the	Utility Hold	ding Con	npany	Act of	1935 or Section	1		
(Print or Type]	Responses)									
1. Name and Address of Reporting Person <u>*</u> OBRIEN JAMES J /KY			uer Name and l AND INC		Tradir	ıg	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (M	(iddle) 3. Date	3. Date of Earliest Transaction				(Check	x an applicable)		
50 E. RIVERCENTER BOULEVARD			(Month/Day/Year) 09/13/2012				Director 10% Owner X_ Officer (give title Other (specify below) below) Chief Executive Officer			
	(Street)		nendment, Da Ionth/Day/Year	-			6. Individual or Jo Applicable Line) _X_ Form filed by C	-	-	
COVINGTO	ON, KY 41012-03	91					Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip) Ta	ble I - Non-E	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date,		Code (Instr. 3, 4 and 5) ar) (Instr. 8) (A) or			l of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	09/13/2012		Code V $S_{\underline{(1)}}$	Amount 60,072	(D) D	Price \$ 76.08	96,679	D		
Common Stock							3,132 <u>(3)</u>	Ι	401(k)	
Common Stock							2,655 (4)	Ι	Lesop	

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form (9-02)

Edgar Filing: ASHLAND INC. - Form 4

displays a currently valid OMB control number.

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
OBRIEN JAMES J /KY 50 E. RIVERCENTER BOULEVARD COVINGTON, KY 41012-0391			Chief Executive Officer				
Signatures							
/s/ David A. Rines, Attorney-in-Fact	09/14/20	012					

Date

**Signature of Reporting Person

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).

(1) The transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 11, 2011.

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$75.25 to \$77.56, inclusive. The reporting person undertakes to provide to Ashland Inc., any security holder of Ashland Inc., or the staff of the

- (2) The second se
- (3) Based on Employee Savings Plan information as of 9-6-12, the latest date for which such information is reasonably available.
- (4) Shares accrued under Ashland's Leveraged Employee Stock Ownership Plan as of 9-6-12.

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.