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Form 4	NC.										
June 16, 2006								OMB A	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							-	3235-0287			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations Statement of Changes in Beneficial OWN SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Section 17(a) of the Public Utility Holding Company Act of					ge Act of 1934,	January 3 Expires: 200 Estimated average burden hours per response 0					
may conti <i>See</i> Instru- 1(b).	nue. Section 17(a			vestment Com	- ·			'n			
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> OBRIEN JAMES J /KY			2. Issuer Name and Ticker or Trading Symbol ASHLAND INC. [ASH]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (M	liddle)	3. Date of Earliest Transaction				(Check all applicable)				
50 E. RIVERCENTER BOULEVARD			(Month/Day/Year) 06/15/2006				Director 10% Owner X Officer (give title Other (specify below) below) Chief Executive Officer				
(Street)			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 					
COVINGTO	ON, KY 41012-03	91					Person		porting		
(City)	(State) (Zip)	Table	e I - Non-Derivat	ive Secur	ities Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	emed on Date, if 'Day/Year)	TransactionAcqu Code Disp	osed of (I r. 3, 4 and (A)))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V Amo	or ount (D)	Price	(Instr. 3 and 4)				
Common Stock							5,340	D			
Common Stock							892 <u>(1)</u>	Ι	401(K)		
Common Stock							3,871 <u>(2)</u>	Ι	LESOP		

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

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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)	4. Transacti Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Derivati Security (Instr. 5)
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Stock Units	\$ 0 <u>(3)</u>	06/15/2006	J <u>(4)</u>	446	(4)	(4)	Common Stock	446	\$ 61.6

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							
David D. Mattinaly							

David B. Mattingly,

Attorney-in-Fact

06/16/2006

**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).

1-for-1 (3)

(2) Shares accrued under Ashland's Leveraged Employee Stock Ownership Plan as of 6-15-2006.

Common Stock Units acquired pursuant to Ashland's Deferred Compensation Plan as of 6-15-06, and exempt under Rule 16b-3(d). (One (4) (1) Common Stock Unit in the Deferred Compensation Plan is the equivalent of one (1) share of Ashland Common Stock.)

(1) Based on Employee Savings Plan information as of 6-15-2006, the latest date for which such information is reasonably available.

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.