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ASHLAND INC.										
Form 4 December 16, 200)9									
FORM 4									PPROVAL	
	UNITED	STATES		RITIES A			COMMISSIO	N OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction	STATEM Filed pur Section 17(Section 1 Public U	SECUP 6(a) of th	Estimated burden hou response	urs per					
1(b).					1					
(Print or Type Respor	ises)									
1. Name and Address of Reporting Person <u>*</u> LIGOCKI KATHLEEN			Symbol	r Name and		Trading	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. Date of Earliest Transaction					(Check all applicable)				
430 CASCADA CASA 2, JARDINES DEL PEDREGAL			(Month/Day/Year) 12/15/2009				X Director 10% Owner Officer (give title Other (specify below) below)			
(3	Street)		4. If Amendment, Date Original Filed(Month/Day/Year)			ป	 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)	Tab	la I Non I	Dorivotivo	Socurities A	cquired, Disposed	of or Bonoficio	lly Ownod	
	nsaction Date th/Day/Year)	2A. Deeme Execution any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, -	ies (A) or of (D)	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	
Reminder: Report on	a separate line	for each cla	ass of sect	urities benet	Perso inforr requi	ons who res nation cont red to respo ays a curre	or indirectly. spond to the colle cained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Date	Underlying Securities	Derivativ
Security	or Exercise		any	Code	of	(Month/Day/Year)	(Instr. 3 and 4)	Security

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)		or osed D) r. 3,	,				(Instr. 5)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Stock Units	\$ 0 <u>(1)</u>	12/15/2009		J <u>(2)</u>		18		(2)	(2)	Common Stock	18	\$ 39.6
Restricted Stock Units	<u>(3)</u>	12/15/2009		J <u>(4)</u>		31		<u>(4)</u>	<u>(4)</u>	Common Stock	31	\$ 39.6

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
LIGOCKI KATHLEEN 430 CASCADA CASA 2 JARDINES DEL PEDREGAL 01900	Х							
Signatures								
/s/David B. Mattingly, Attorney-in-Fact		12/16/20)09					
**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) 1-for-1
- Common Stock Units acquired pursuant to Ashland's Deferred Compensation Plan for Non-Employee Directors as of 12-15-09 and
 (2) exempt under Rule 16b-3. (One (1) Common Stock Unit in the Deferred Compensation Plan for Non-Employee Directors is the equivalent of one (1) share of Ashland Common Stock.)
- (3) Each Restricted Stock Unit represents a right to receive one (1) share of Ashland Common Stock.

Restricted Stock Units acquired pursuant to Ashland's Deferred Compensation Plan for Non-Employee Directors as of 12-15-09 and
(4) exempt from Rule 16b-3. (One (1) Restricted Stock Unit in the Deferred Compensation Plan for Non-Employee Directors is the equivalent of one (1) share of Ashland Common Stock.)

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.