## Edgar Filing: ASHLAND INC. - Form 4

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ASHLAND Form 4											
September 1	_								OMB AF	PROVAL	
FORM		SECURITIES AND EXCHANGE CC Washington, D.C. 20549					OMB Number:	3235-0287			
Check th if no lon subject t Section Form 4 c	ger <b>STATE</b> 16.	MENT O	IGES IN SECUR		ICIA	L OW	NERSHIP OF	Expires: Estimated a burden hour response	•		
Form 5 obligations may continue.Filed pursuant to Section 16(a) of the Securities Exchange Act of 193- Section 17(a) of the Public Utility Holding Company Act of 1935 or Sec 30(h) of the Investment Company Act of 19401(b).30(h) of the Investment Company Act of 1940						1935 or Section	•				
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Solomon Walter H			2. Issuer Name <b>and</b> Ticker or Trading Symbol ASHLAND INC. [ASH]					5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3499 BLAZER PARKWAY			3. Date of Earliest Transaction (Month/Day/Year) 09/15/2014					(Check all applicable) <u>X</u> Director 10% Owner X_ Officer (give title Other (specify below) Vice President			
				Amendment, Date Original (Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
LEXINGTO	ON, KY 40509							Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative	Secur	ities Acq	uired, Disposed of,	, or Beneficiall	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	ned n Date, if Day/Year)	Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) ay/Year) (Instr. 8) (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)		
Common Stock	09/15/2014			Code V $J(1)$	Amount 2	or (D) A	Price \$ 107.12	(Instr. 3 and 4) 22,133 (2)	D		
Common Stock								7,495 <u>(3)</u>	I	401(k)	

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

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 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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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				
Solomon Walter H 3499 BLAZER PARKWAY LEXINGTON, KY 40509			Vice President					
Signatures								
/s/ Issa O. Yesufu, Attorney-in-Fact		09/17/2014						

<u>\*\*</u>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) Restricted Common Stock paid in lieu of cash dividends (exempt pursuant to Rule 16b-3) pursuant to the Amended and Restated 2011 Ashland Inc. Incentive Plan and applicable restricted stock agreements.
- (2) Includes 910 shares of unvested Restricted Stock.
- (3) Based on Employee Savings Plan information as of September 15, 2014, 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.