## Edgar Filing: UST INC - Form 4

UST INC Form 4 June 13, 200	15									
FORM							OMB A	PPROVAL		
	UNITED STAT	ES SECURITIES A Washington,			NGE	COMMISSION	OMB Number:	3235-0287		
Check th if no lon subject to	OF CHANGES IN I	GES IN BENEFICIAL OWNERS				Expires: Estimated	January 31, 2005 average			
Section 16. SECURITIES							burden hou	burden hours per		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations May continue. See Instruction 1(c) See Instruction See Instruction 1(c) See Instruction 1(c) 1										
(Print or Type	Responses)									
1. Name and A HEID JOSE	Symbol					5. Relationship of Reporting Person(s) to Issuer				
(1 4)	(First) (Middle)	UST INC [UST]				(Check all applicable)				
(Last) C/O UST IN PUTNAM	3. Date of Earliest Tra (Month/Day/Year) 06/10/2005	/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify below) below)				
	4. If Amendment, Dat	endment, Date Original			6. Individual or Joint/Group Filing(Check					
GREENWICH CT 06830							One Reporting Person Jore than One Reporting			
(City)	(State) (Zip)	Table I - Non-D	erivative	Securi	ties Ac	equired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. E (Month/Day/Year) Exect any (Mon		Disposed (Instr. 3,	l (A) o l of (D	)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
common stock	06/10/2005	A	40	A	\$ 0	10,259 <u>(1)</u>	D			

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 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)

## Edgar Filing: UST INC - Form 4

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. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh	ips				
	Director	10% Owner	Officer	Other			
HEID JOSEPH E C/O UST INC. 100 WEST PUTNAM AVENUE GREENWICH, CT 06830	Х						
Signatures							
Maria R. Sharpe, Power of Attorney	00	6/13/2005					
<pre>Signature of Reporting Person</pre>		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) Includes a total of 1 share held in the UST Dividend Reinvestment Plan as of this date.

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.