Edgar Filing: DENNIS PATRICIA DIAZ - Form 4

| DENNIS PA Form 4 May 02, 200 | TRICIA DIAZ | | | | | | | | | | | | |
|---|---|--|--|---|----------------------|------------------|---------|---|--|------------------------|--|--|--|
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | | | OMB APPROVAL | | | |
| | Washington, D.C. 20549 | | | | | | | | OMB Number: | 3235-0287 | | | |
| Check th if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b). | 6. r Filed purs inue. | ox STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Expires: 20 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Estimated average burden hours per response Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section | | | | | | | | irs per | | | |
| (Print or Type I | Responses) | | | | | | | | | | | | |
| DENNIS PATRICIA DIAZ S | | | 2. Issuer Name and Ticker or Trading Symbol UST INC [UST] | | | | g | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| (Last) | (First) (M | liddle) | 3. Date of Earliest Transaction | | | | | ck an applicable | (an applicable) | | | | |
| | | | (Month/Day/Year)X_ Director 04/30/2007Officer (give below) | | | | | title 0% Owner below) | | | | | |
| | (Street) 4. If Amendment, Date Filed(Month/Day/Year) | | | | ar) Applicable Line) | | | | int/Group Filing(Check One Reporting Person | | | | |
| GREENWICH, CT 06830 | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (State) (| Zip) | Table | I - Non-De | erivative S | Securi | ties Ac | quired, Disposed o | f, or Beneficial | lly Owned | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution any | Date, if | 3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5) | | |) | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Indirect Beneficial | | | |
| | | | | Code V | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | | | |
| Common Stock | 04/30/2007 | | | А | 80 | А | \$0 | 9,821 | D | | | | |
| Common Stock | 05/01/2007 | | | А | 50 | А | \$0 | 10,763 <u>(1)</u> | D | | | | |

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) | 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 | | | |
| DENNIS PATRICIA DIAZ C/O UST INC. 100 WEST PUTNAM AVENUE GREENWICH, CT 06830 | Х | | | | | | |
| Signatures | | | | | | | |
| Maria R. Sharpe, by Power of Attorney | | 05/02/2007 | | | | | |
| **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) Includes a total of 655 shares held in the UST Dividend Reinvestment Plan and 237 Phantom shares resulting from dividend reinvestment under a deferred compensation 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.