## Edgar Filing: UST INC - Form 4

UST INC

| Form 4   |   |  |  |   |             |           |         |   |  |   |  |  |
|--|---|--|--|---|-------------|-----------|---------|---|--|---|--|--|
| April 04, 2008   |   |  |  |   |             |           |         |   |  |   |  |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION  |   |  |  |   |             |           |         |   | т  | OMB APPROVAL  |  |  |
| Washington, D.C. 20549   |   |  |  |   |             |           |         | OMB<br>Number:  | 3235-0287  |   |  |  |
| Check this bo<br>if no longer  |   |  |  |   |             |           |         |   | Expires:   | January 31,<br>2005   |  |  |
| subject to<br>Section 16.<br>Form 4 or   |   | F CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES |  |   |             |           |         | Estimated a<br>burden hou<br>response   | average<br>Irs per   |   |  |  |
| Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |   |  |  |   |             |           |         |   |  |   |  |  |
| (Print or Type Resp  | oonses)   |  |  |   |             |           |         |   |  |   |  |  |
| HEID JOSEPH E Symbol   |   |  | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>J <b>ST INC [UST]</b> |   |             |           |         | 5. Relationship of Reporting Person(s) to Issuer  |  |   |  |  |
| (Last)   | (First) (Mi   |  | 3. Date of Earliest Transaction ((   |   |             |           |         |   | ck all applicable)   |   |  |  |
|  |   |  | Month/Da   | h/Day/Year)   |             |           |         | X_ Director 10% Owner<br>Officer (give title Other (specify<br>below) below)                                  |  |   |  |  |
|  | (Street) 4. If Amer   |  |  |   | e Original  |           |         | 6. Individual or Joint/Group Filing(Check   |  |   |  |  |
| Filed(Mont<br>STAMFORD, CT 06905   |   |  |  | -   |             |           |         | Applicable Line)<br>_X_ Form filed by One Reporting Person<br>Form filed by More than One Reporting<br>Person |  |   |  |  |
| (City)   | (State) (Z  | Zip)   | Table  | I - Non-De  | erivative S | Securi    | ties Ac | quired, Disposed o  | f, or Beneficial   | lly Owned   |  |  |
|  | Yitle of<br>curity2. Transaction Date<br>(Month/Day/Year)2A. Deemed<br>Execution Date, if |  |  | 3. 4. Securities<br>TransactionAcquired (A) or<br>Code Disposed of (D)<br>(Instr. 8) (Instr. 3, 4 and 5)<br>(A) |             |           |         | SecuritiesFBeneficially(OwnedI  | 5. Ownership<br>Form: Direct<br>D) or<br>Indirect (I)<br>Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |   |  |  | Code V  | Amount      | or<br>(D) | Price   | (Instr. 3 and 4)  |  |   |  |  |
| Common 0<br>Stock 0  | 4/02/2008   |  |  | А   | 117         | А         | \$0     | 17,719  | D  |   |  |  |
| Common 0<br>Stock 0  | 4/03/2008   |  |  | А   | 48          | А         | \$0     | 17,768 <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.

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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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Amou<br>Unde<br>Secur | rlying                                 | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|-----------------------|--|---|---|
|   |   |   |   | Code V                                | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title                 | Amount<br>or<br>Number<br>of<br>Shares |   |   |

## **Reporting Owners**

| Reporting Owner Name / Address  | Relationships |           |         |       |  |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|--|
| Reporting O when Plante, Plantess   | Director      | 10% Owner | Officer | Other |  |  |  |  |
| HEID JOSEPH E<br>C/O UST INC.<br>6 HIGH RIDGE PARK, BLDG. A<br>STAMFORD, CT 06905 | Х             |           |         |       |  |  |  |  |
| Signatures  |               |           |         |       |  |  |  |  |
| Lorna R. Simms, Power of Attorney   | 04/04/2008    |           |         |       |  |  |  |  |
| <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) 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.