SEC Form 4	
------------	--

 \square

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burde	en									
hours per response:	0.5									

1. Name and Addres	1 0	son [*]	2. Issuer Name and Ticker or Trading Symbol ASHLAND INC [ASH]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>OBRIEN JAMES J /KY</u>					Director	10% Owner				
(Last) 50 E. RIVERCE	(First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/15/2004	x	Officer (give title below) Chief Executive	Other (specify below) Officer				
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	Line)	idual or Joint/Group Filing	g (Check Applicable				
COVINGTON	KY	41012-0391		X	Form filed by One Repo	orting Person				
					Form filed by More than	n One Reporting				
(City)	(State)	(Zip)			Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Transaction Disposed Of (D) (Instr. 3, 4 and Code (Instr. 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)	
Common Stock								3,340	D		
Common Stock								3,192 ⁽¹⁾	Ι	LESOP	
Common Stock								766 ⁽²⁾	I	401(K)	

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. Transa Code (8)		of	ired r osed) 7.3,4	6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Common Stock Units	\$0 ⁽³⁾	06/15/2004		J ⁽⁴⁾		426		(4)	(4)	Common Stock	426	\$0	92,199	D	

Explanation of Responses:

1. Shares accrued under Ashland's Leveraged Employee Stock Ownership Plan as of 5-31-04.

2. Based on Employee Savings Plan information as of 6-16-04, the latest date for which such information is reasonably available.

3. Converts to common stock on a one-for-one basis.

4. Common Stock Units acquired pursuant to Ashland's 1995 Deferred Compensation Plan as of 6-15-04, and exempt under Rule 16b-3(d). (One (1) Common Stock Unit in the 1995 Deferred Compensation Plan is the equivalent of one (1) share of Ashland Common Stock)

M. Craig Hall

** Signature of Reporting Person Date

06/17/2004

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.