Edgar Filing: Owens Michael J - Form 4

Form 4 January 04, 2										
FORM	1								PPROVAL	
	UNITED S	TATES SECU	RITIES A shington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this		vv a	sington,	D.C. 20.	747			Expires:	January 31,	
if no long subject to Section 16 Form 4 or Form 5	6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							Estimated average burden hours per response 0.	
obligation may conti <i>See</i> Instru 1(b).	^{1s} Section 17(a) of the Public U 30(h) of the In	tility Hold	ling Com	pany	Act o	f 1935 or Sectio	on		
(Print or Type R	Responses)									
Owens Michael J Symbol			er Name and		Fradin	g	5. Relationship of Reporting Person(s) to Issuer			
			USER-BU ANIES, IN)]		(Check all applicable)			
(Last)	(Last) (First) (Middle) 3. Date of I (Month/Da DNE BUSCH PLACE 01/01/20						Director 10% Owner X Officer (give title Other (specify below) below) Strategy Committee Member			
	(Street)	4 If Am	endment, Dat	te Original			6. Individual or J			
ST LOUIS	MO 63118-1852		nth/Day/Year)	-			Applicable Line) _X_ Form filed by		erson	
(City)		Zip) Tab		• .• .			Person			
1.Title of	2. Transaction Date	1 1 1 1 1 1	ie I - Non-D	4. Securi		ties Ac	quired, Disposed o 5. Amount of		•	
Security (Instr. 3)		Execution Date, if any (Month/Day/Year)	Transactio Code	4. Security onAcquired Disposed (Instr. 3,	l (A) c l of (D))	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
C			Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock (\$1 par value)	01/01/2007		А	6,898 (1)	А	\$0	49,465	D		
Common Stock (\$1 par value)							100	I	By daughter	
Common Stock (\$1 par value)							100	Ι	By daughter	
Common Stock (\$1							100	Ι	By daughter	

Common Stock (\$1 par value)	100	I	By daughter
Common Stock (\$1 par value)	10,123 <u>(2)</u>	Ι	By 401(k) Plan

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)

1. Title of	2. Commission	3. Transaction Date		4. Trono oti	5.	6. Date Exer		7. Title and A		
Derivative Security	Conversion or Exercise	(Month/Day/Year)	any	Transaction Code	of	Expiration D (Month/Day/		Underlying S (Instr. 3 and		Derivative Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative					(Instr. 5)
	Derivative Security				Securities Acquired					
					(A) or					
					Disposed of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
						Date	Expiration	Title	or Number	
						Exercisable	Date	11110	of	
				Code V	(A) (D)				Shares	
Phantom						(4)	(4)	Common		
Stock Units	<u>(3)</u>					(4)	(4)	Stock	<u>(4)</u>	

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Owens Michael J ONE BUSCH PLACE ST. LOUIS, MO 63118-1852			Strategy Committee Member					
Signatures								
Laura H. Reeves, Attorney-in-Fact for Michael J.								
Owens			01/04/2007					
<u>**</u> Signature of Reporting	g 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) Award of performance-vesting restricted stock under shareholder approved equity incentive plan pursuant to Rule 16b-3(d).
- (2) Based on the latest plan statement as of September 30, 2006.
- (3) Each phantom share represents the value of one actual share of Common Stock.
- (4) Represents reporting person's interest in phantom shares of Anheuser-Busch Companies, Inc. resulting from participation in the Anheuser-Busch 401(k) Restoration Plan. Phantom shares have no exercise feature nor any expiration 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.