FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |  |  |  |
| hours per response:      | 0.5       |  |  |  |  |  |  |  |  |  |  |

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

|   |  | of Reporting Persor                        | <u>USI</u>  | 2. Issuer Name and Ticker or Trading Symbol USEC INC [ USU ] |   |                 |         |          |  |   |   |  | ationship<br>k all applic<br>Directo   | *                   |  |  |                     |   |  |
|---|--|--|---|--|---|-----------------|---------|----------|--|---|---|--|--|---------------------|--|--|---------------------|---|--|
| (Last)  | (Fi  |  | 3. Date of Earliest Transaction (Month/Day/Year) 02/10/2004 |  |   |                 |         |          |  |   | X   | below)                                     | (give title  | Other (sp<br>below) |  | specify  |                     |   |  |
| 6903 RC   | OCKLEDGE   | E DRIVE                                    |   |  |   |                 |         |          |  |   |   | President and CEO                          |  |                     |  |  |                     |   |  |
| (Street)  |  | 4. If A                                    | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |  |   |                 |         |          |  |   | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |  |                     |  |  |                     |   |  |
| BETHES  | BETHESDA MD 20817  |  |   |  |   |                 |         |          |  |   |   |  |  | X                   | X Form filed by One Reporting Person Form filed by More than One Reporting |  |                     |   |  |
| (City)  | (Si  | (State) (Zip)                              |   |  |   |                 |         |          |  |   |   |  |  |                     | Person   | ,  | е шаг               | i One Repo  | oning  |
|   | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |  |   |  |   |                 |         |          |  |   |   |  |  |                     |  |  |                     |   |  |
| 1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day |  |  |   |  |   | Execution Date, |         |          | 3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (I and 5) |   |   |  |  |                     | 5. Amou<br>Securitie<br>Benefici<br>Owned                                  | es<br>ally   | Form<br>(D) o       | n: Direct<br>r<br>ect (I)   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership                |
|   |  |  |   |  |   |                 |         |          |  | v | Amount  | Amount (A) or (D)                          |  | ce                  | Reporte<br>Transac   | llowing<br>ported<br>ansaction(s)<br>str. 3 and 4)   |                     | 7. 4)   | (Instr. 4)   |
| Common  | Stock  |  | 2004  | .004   |   | A               |         | 76,245 A |  |   | \$ <mark>0</mark>   | 371,                                       | ,296(1)  |                     | D  |  |                     |   |  |
|   | 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<br>Date<br>(Month/Day/Year) | if any  | med<br>on Date,<br>Day/Year)                                 | 4.<br>Transaction<br>Code (Instr.<br>8) |                 | of      |          | 6. Date Exercisa<br>Expiration Date<br>(Month/Day/Yea                |   | е   | Amount<br>Securitie<br>Underly<br>Derivati | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                     | 8. Price<br>of<br>Derivative<br>Security<br>(Instr. 5)                     | 9. Numbe<br>derivative<br>Securities<br>Beneficia<br>Owned<br>Following<br>Reported<br>Transacti<br>(Instr. 4) | e<br>s<br>ally<br>g | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr.<br>4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |  |  |   |  | Code                                    | v               | (A)     | (D)      | Date<br>Exercisab  |   | xpiration<br>ate  | Title                                      | Amou<br>or<br>Numb<br>of<br>Share  | er                  |  |  |                     |   |  |
| Stock<br>option<br>(right to<br>buy)                          | \$8.05   | 02/10/2004                                 |   |  | A                                       |                 | 176,398 |          | (2)  | 0 | 2/10/2009   | Commor                                     | 176,3  | 98                  | \$0  | 176,39   | 98                  | D   |  |

## **Explanation of Responses:**

- $1. \ Includes \ 101,875 \ restricted \ shares \ is sued \ pursuant \ to \ the \ Company's \ equity \ incentive \ plan.$
- 2. The option vests in 3 equal annual installments beginning on February 10, 2005.

## Remarks:

Timothy B. Hansen, Attorney 02/12/2004 in Fact

\*\* Signature of Reporting Person Date

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.