FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

0.5

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person* <u>ALTRIA GROUP INC</u>															Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
(Last) 120 PAR	`	(First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Other (specify below)								specify				
(Street) NEW YO		tate)	10017 (Zip)		-	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tab	le I - Noi	า-Deriv	ative	Se	curiti	es A	cqı	uired, I	Disp	osed (of, or E	ene	eficiall	y Own	ed			
Date			2. Trans Date (Month/		ay/Year) if any		A. Deemed kecution Date, any lonth/Day/Year)		, Transaction Dispose Code (Instr. 5)		rities Acq ed Of (D) (Securi Benefi Owned	cially I Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	(A)	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 03/30/				0/2004	2004			X		530 ⁽¹⁾ D		\$31	276,582,800			D				
		Т	able II -									sed of onverti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, Trans Code			of		Ex	6. Date Exercisal Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)		lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	te ercisable		piration te	Title	or Nu of	umber					
Employee stock option (right to	\$31	03/30/2004			х			530	01	/31/2003	06	/12/2011	Class A		530	\$0	0		D	

Explanation of Responses:

 $1. \ Shares \ acquired \ by \ employee \ from \ Altria \ Group, \ Inc. \ pursuant \ to \ employee \ option \ exercise.$

/s/ G. Penn Holsenbeck Vice President, Associate General Counsel & Corp. Secretary

03/31/2004

** Signature of Reporting Person Date

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

- * 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.