## Edgar Filing: ALTRIA GROUP, INC. - Form 4

ALTRIA GI	ROUP, INC.										
Form 4											
January 02,	2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AP	OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
Check this box									Expires: Jan		
if no longer subject to STATEMENT OF CHAN				NGES IN BENEFICIAL OWNER				ERSHIP OF	Estimated a	2005 average	
Section 16.				SECURITIES					s per		
Form 4 o Form 5			lestion 1	16(a) of $b$		:4: a a T		A at af 1024	response	0.5	
obligatio							•	Act of 1934, 1935 or Section			
may con	unue.			•	•	-	t of 1940				
<i>See</i> Instr 1(b).	ruction	50(11)	or the h	livestillen	e compe						
(Print or Type	Responses)										
Barrington Martin J. Symbol				er Name and Ticker or Trading IA GROUP, INC. [MO]				5. Relationship of Reporting Person(s) to Issuer			
(Least)	(Einst)	Middle)					1	(Check	all applicable)	1	
			of Earliest Transaction Day/Year)			_X_ Director10% Owner					
6601 WEST BROAD STREET 12/30/2			/2014 -				XOfficer (give titleOther (specify				
							below) below) Chairman and CEO				
			endment, Date Original			,	6. Individual or Joint/Group Filing(Check				
			onth/Day/Year)				Applicable Line)				
			,	2	,			_X_ Form filed by Or			
RICHMON	D, VA 23230						Ī	Form filed by Mo Person	ore than One Rep	porting	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivativ	e Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Date			3. 4. Securities Acquired (A)				5. Amount of	6.	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)		Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities Beneficially	Ownership Form:	Indirect Beneficial	
(IIIsu. 5)								Owned		Ownership	
		·	•					Following	or Indirect	(Instr. 4)	
						(A)		Reported Transaction(s)	(I) (Instr. 4)		
						or	D.	(Instr. 3 and 4)	(111501. 4)		
				Code V	Amount	(D)	Price \$				
Common Stock	12/30/2014			F	48,429 (1)	D	φ 50.0965 (2)	781,393 <u>(3)</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.

 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	. ,	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Barrington Martin J. 6601 WEST BROAD STREET RICHMOND, VA 23230	Х		Chairman and CEO				
Signatures							
W. Hildebrandt Surgner, Jr. for M Barrington	Martin J.		01/02/2015				
<u>**</u> Signature of Reporting Per	son		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) Shares withheld to satisfy taxes on the vesting of Restricted Stock.
- (2) The average of the high and low price of Altria Group, Inc. common stock on December 30, 2014.
- (3) Includes 517,960 shares of Restricted Stock.

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.