ALTRIA GROUP, INC.

Form 4 May 23, 2016

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB

3235-0287 Number:

January 31, Expires: 2005 Estimated average

**OMB APPROVAL** 

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if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * CASTEEN JOHN T III |          |          | 2. Issuer Name and Ticker or Trading<br>Symbol<br>ALTRIA GROUP, INC. [MO] | 5. Relationship of Reporting Person(s) to Issuer  |
|--|----------|----------|---|---|
| (Last)   | (First)  | (Middle) | 3. Date of Earliest Transaction   | (Check all applicable)  |
| 6601 WEST BROAD STREET                                       |          | REET     | (Month/Day/Year)<br>05/19/2016  | _X_ Director 10% Owner Officer (give title below) Other (specify below)                                 |
|  | (Street) |          | 4. If Amendment, Date Original Filed(Month/Day/Year)                      | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person |
| RICHMOND, VA 23230   |          |          |   | Form filed by More than One Reporting Person  |

| (City)     | (State) (A          | Table              | I - Non-Do   | erivative Securities Ac | quired, Disposed o | of, or Beneficial | lly Owned    |
|------------|---------------------|--------------------|--------------|-------------------------|--------------------|-------------------|--------------|
| 1.Title of | 2. Transaction Date |                    | 3.           | 4. Securities           | 5. Amount of       | 6. Ownership      | 7. Nature of |
| Security   | (Month/Day/Year)    | Execution Date, if | Transactio   | onAcquired (A) or       | Securities         | Form: Direct      | Indirect     |
| (Instr. 3) |                     | any                | Code         | Disposed of (D)         | Beneficially       | (D) or            | Beneficial   |
|            |                     | (Month/Day/Year)   | (Instr. 8)   | (Instr. 3, 4 and 5)     | Owned              | Indirect (I)      | Ownership    |
|            |                     |                    |              |                         | Following          | (Instr. 4)        | (Instr. 4)   |
|            |                     |                    |              | (4)                     | Reported           |                   |              |
|            |                     |                    |              | (A)                     | Transaction(s)     |                   |              |
|            |                     |                    | $\alpha + w$ | or                      | (Instr. 3 and 4)   |                   |              |
|            |                     |                    | Code V       | Amount (D) Price        |                    |                   |              |
| Common     |                     |                    |              | 2 770                   |                    |                   |              |

Common 05/19/2016 A 38,381 (2) D (1) Stock

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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

| 1. Title of | 2.          | 3. Transaction Date | 3A. Deemed         | 4.         | 5.         | 6. Date Exercisable | e and     | 7. Title and     | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------------|-----------|------------------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | onNumber   | Expiration Date     |           | Amount of        | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/Year)    | )         | Underlying       | Security    | Secui  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e                   |           | Securities       | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities |                     |           | (Instr. 3 and 4) |             | Owne   |
|             | Security    |                     |                    |            | Acquired   |                     |           |                  |             | Follo  |
|             |             |                     |                    |            | (A) or     |                     |           |                  |             | Repo   |
|             |             |                     |                    |            | Disposed   |                     |           |                  |             | Trans  |
|             |             |                     |                    |            | of (D)     |                     |           |                  |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |                     |           |                  |             |        |
|             |             |                     |                    |            | 4, and 5)  |                     |           |                  |             |        |
|             |             |                     |                    | Code V     | (A) (D)    | Date Expi           | iration ' | Title Amount     |             |        |
|             |             |                     |                    |            | (11)       | Exercisable Date    |           | or               |             |        |
|             |             |                     |                    |            |            | Zaterensuere Butt   |           | Number           |             |        |
|             |             |                     |                    |            |            |                     |           | of               |             |        |
|             |             |                     |                    |            |            |                     |           | Shares           |             |        |

# **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |         |       |  |  |
|--------------------------------|---------------|-----------|---------|-------|--|--|
| •                              | Director      | 10% Owner | Officer | Other |  |  |
| CASTEEN JOHN T III             |               |           |         |       |  |  |
| 6601 WEST BROAD STREET         | X             |           |         |       |  |  |

## **Signatures**

RICHMOND, VA 23230

W. Hildebrandt Surgner, Jr. for John T. 05/23/2016 Casteen III

## **Explanation of Responses:**

\*\*Signature of Reporting Person

- 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).

Date

- (1) Deferred stock awarded under the 2015 Stock Compensation Plan for Non-Employee Directors.
- Deferred stock held under the Stock Compensation Plan for Non-Employee Directors, including an increase of 1,336 shares acquired through the reinvestment of dividends since May 20, 2015, the date of the last reportable transaction.

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.

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