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

ALTRIA GI	ROUP, INC.										
Form 4											
February 01	, 2017										
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
	<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSI</b> Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287		
Check th if no lon subject t Section Form 4 c	ger <b>STAT</b> 16.									Expires:January 31 2008Estimated averageburden hours per response0.8	
obligation may con	Form 5 obligations may continue. See Instruction 1(b). 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							n			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Feldman Ivan S.			2. Issuer Name <b>and</b> Ticker or Trading Symbol ALTRIA GROUP, INC. [MO]				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check					ck all applicable			
6601 WEST	Г BROAD STF	REET	(Month/Da 01/30/20	-				Director X_Officer (giv below) Vice Pres		6 Owner er (specify roller	
	(Street)		ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
RICHMON	ID, VA 23230							Form filed by I Person	More than One R	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	any		emed on Date, if /Day/Year)	3.4. SecuTransactionAcquirCodeDispos(Instr. 8)(Instr. 7)		l (A) c l of (D	))	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	01/30/2017			А	1,773 (1)	A	\$0	42,845 <u>(2)</u>	D		
Common Stock								1,238	I	DPS (3)	

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

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Feldman Ivan S. 6601 WEST BROAD STREET RICHMOND, VA 23230			Vice President and Controller				
Signatures							
W. Hildebrandt Surgner, Jr. for I Feldman	lvan S.		02/01/2017				
**Signature of Reporting Person	ı		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) Restricted Stock Units awarded in accordance with the terms of the Issuer's equity compensation plans.
- Includes 9,280 Restricted Stock Units and 5,110 shares of Restricted Stock. Total also includes 1,931 shares held in the Altria Employee
   (2) Stock Purchase Plan, including 68 shares acquired through the reinvestment of dividends since February 11, 2016, the date of the last reportable transaction.
- (3) Shares held in the Altria Deferred Profit-Sharing Plan.

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.