FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CI	HANGES IN	BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person* <u>LEBOW BENNETT S</u>						2. Issuer Name and Ticker or Trading Symbol VECTOR GROUP LTD [ VGR ]									_	olicable) ctor		X 10	% Owr	ner
(Last) (First) (Middle) C/O VECTOR GROUP LTD. 100 S.E. SECOND STREET				05/	3. Date of Earliest Transaction (Month/Day/Year) 05/12/2005									X Officer (give title Other (specify below)  Chairman of the Board and CEO						
(Street) MIAMI	FL		33131		-   4. If	f Amen	dment,	Date	of Origi	inal Fil	ed (Month/Da	ay/Year)		6. Ind Line)	Forn	n filed by	One Re	ing (Cheo eporting F nan One I	Person	
(City)	(St		Zip)	lon-Deriv	ative	Sec	uritie	s An	auire	d D	isnosed o	f or B	enefi	cially	, Owne	-d				
1. Title of Security (Instr. 3) 2. To Date		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an 5)			od S	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	т	eported ransaction nstr. 3 an				(Instr.	4)
Common	Stock			05/12/20	005				J <sup>(1)</sup>		500,000	D	\$0 <sup>(:</sup>	1)	9,810,	055	1	I	By LeBow Gamma Limited Partnership <sup>(3)</sup>	
Common	Stock			05/12/20	005				J <sup>(1)</sup>		500,000	A	\$0(	1)	867,0	)33	]	By LeBow Alpha LLLP <sup>(4)</sup>		a
Common	Stock			05/12/20	005				<b>J</b> <sup>(2)</sup>		500,000	D	\$0 <sup>©</sup>	2)	367,033		I By LeBow Alpha LLLP <sup>(4)</sup>		a	
		Та	ıble II								oosed of, convertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Date Execution		on Date, Transac Code (Ir		5. Number of		6. Date Exp Expiration I (Month/Day)		cisable and Oate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		9. Numb derivati Securiti Benefic Owned Followin Reporte Transac (Instr. 4	ve es ially ng ed etion(s)	10. Ownersi Form: Direct (I or Indire (I) (Instr	hip of Bo O) O ect (li	1. Nature f Indirect eneficial wnership nstr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amoun or Numbe of Shares	r						

## **Explanation of Responses:**

- 1. Represents a transfer by LeBow Gamma Limited Partnership to LeBow Alpha LLLP.
- 2. Represents a transfer by LeBow Alpha LLLP to LeBow Family Irrevocable Trust, a trust whose beneficiaries are the children and grandchildren of Mr. LeBow. Mr. LeBow does not possess beneficial ownership of the shares held by the trust for the purpose of Section 16 of the Securities Exchange Act of 1934.
- 3. LeBow Gamma Limited Partnership is a Nevada limited partnership. LeBow Holdings, Inc., a Nevada corporation, is the sole stockholder of LeBow Gamma Inc., a Nevada corporation, which is the general partner of LeBow Gamma Limited Partnership. Mr. LeBow is a director, officer and sole stockholder of LeBow Holdings, Inc. and a director and officer of LeBow Gamma, Inc.
- 4. LeBow Alpha LLLP is a Delaware limited liability limited partnership. LeBow Holdings, Inc. is the general partner of LeBow Alpha LLLP.

05/12/2005 /s/ Bennett S. LeBow

\*\* 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.