## Edgar Filing: VECTOR GROUP LTD - Form 4

VECTOR (	GROUP LTD									
Form 4										
February 2	7, 2013									
FOR			GEOU			CHANCI		NT.	PPROVAL	
Washington, D.C. 20549								N OMB Number:	3235-0287	
if no lo	this box							Expires:	January 31, 2005	
subject	to STATEN	WNERSHIP OF	Estimated							
Section 16. SECURITIES								burden hou	urs per	
Form 4 Form 5		rement to	Saction	16(a) of th	o Soouri	tion Excha	har A at of 1024	response	. 0.5	
Form 5 obligations 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										
may co	nunue.			•	•	ny Act of 1		011		
See Ins 1(b).	truction	50(11)	or the r	ii vestinein	. Compu	iy 1100 01 .	1910			
(Print or Type	e Responses)									
	Address of Reporting	Person <sup>*</sup>		2. Issuer Name and Ticker or Trading			5. Relationship of Reporting Person(s) to			
LORBER	HOWARD M		Symbol				Issuer			
			VECT	OR GROU	JP LTD	[VGR]	(Check all applicable)			
(Last)	(First) (	Middle)	3. Date of	of Earliest T	ransaction					
		100		(Month/Day/Year)			XDirector10% Owner XOfficer (give titleOther (specify			
	FOR GROUP LTE		02/26/2	2013			below) below)			
S.E. SECC FLOOR	OND STREET; 32	ND					Pro	esident and CEC	)	
FLOOK										
				4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
			Filed(Mo	onth/Day/Yea	r)		Applicable Line) _X_ Form filed by	One Reporting P	erson	
MIAMI, F	L 33131					Form filed by More than One Reporting				
							Person			
(City)	(State)	(Zip)	Tal	ole I - Non-I	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date			3.	4. Securit		5. Amount of	6. Ownership	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution	Date, if	Transactio Code	nAcquired Disposed		Securities Beneficially	Form: Direct (D) or Indirect	Indirect Beneficial	
(11150.3)		any (Month/Da		(Instr. 8)	(Instr. 3, 4		•	(I) or maneet	Ownership	
			•	. ,			Following	(Instr. 4)	(Instr. 4)	
						(A)	Reported Transaction(s)			
						or	(Instr. 3 and 4)			
				Code V	Amount	(D) Price				
Reminder: Re	eport on a separate line	e for each cl	ass of sec	urities benef	ficially ow	ned directly	or indirectly.			
							spond to the colle		SEC 1474	
							tained in this forn		(9-02)	
							ond unless the fo ently valid OMB co			
					numb	•				
	Tab				-	posed of, or convertible	Beneficially Owner	d		
		(e.g.,	puts, cal	is, wai i ailts	, options,	convertible	securities)			

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amou
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securi

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) Disposed of ( (Instr. 3, 4, ar 5)	) or (D)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (	(D)	Date Exercisable	Expiration Date	Title	Amo Nun Shai
Employee Stock Option (right to buy)	\$ 16.12	02/26/2013		А	500,000		02/26/2017 <u>(1)</u>	02/26/2023	Common Stock	500

## **Reporting Owners**

Reporting Ox	Relationships					
Reporting O	<b>Reporting Owner Name / Address</b>			Officer	Other	
LORBER HOWARD M C/O VECTOR GROUP LTD. 100 S.E. SECOND STREET; 32ND FLOOR MIAMI, FL 33131		Х		President and CEO		
Signatures						
/s/ Howard M Lorber	02/27/2013					
<u>**</u> Signature of Reporting Person	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) Subject to acceleration upon a "change of control" (as defined) or termination of employment due to death or disability.

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.