FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C. 20549
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Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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* KIRKLAND J BRYANT III					2. Issuer Name and Ticker or Trading Symbol VECTOR GROUP LTD [VGR]								(Checl	all applicable) Director		10% O		wner
CTOR GRO					3. Date of Earliest Transaction (Month/Day/Year) 03/01/2022								Х		ow) Tow		below)	Speciny
				4. If #	4. If Amendment, Date of Original Filed (Month/Day/Year))	6. Indi Line) X	· '					
(Sta	, ,		n Deriva	tive 9	Secur	ritios	Λ.c.α	uired	Die	nosed of	orE	Ronofi	icially	Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date			ion 2A. Deemed Execution Date,		3. 4. Securities			s Acqu	ired (A)) or 5. Am 4 and Secui Benet Owne		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
			02/01/2	2 /04 /2022				Code	v	Amount	+	_		Transa (Instr.	saction(s) : 3 and 4)		<u> </u>	(1150.4)
Common Stock 03/01/2022 A 100,000 A \$0.00(1) 396,772 D Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Code (Instr. 8) Securi Acquii (A) or Dispoo of (D) (Instr.		rative rities ired r osed)	Expirat (Month	tion Da	ate (ear)	3 and 4) Amou		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	(Fir CTOR GROSCAYNE B FL (State of the state of the stat	(First) (I CTOR GROUP LTD. SCAYNE BLVD; 10TH FLO FL 3 (State) (Z Table Security (Instr. 3) 1 Stock Tal 2. Conversion or Exercise Price of Derivative (Month/Day/Year)	(First) (Middle) CTOR GROUP LTD. SCAYNE BLVD; 10TH FLOOR FL 33137 (State) (Zip) Table I - No Security (Instr. 3) 1 Stock Table II - Conversion or Exercise Price of Derivative (Month/Day/Year) (Month/Day/Year)	(First) (Middle) CTOR GROUP LTD. SCAYNE BLVD; 10TH FLOOR FL 33137 (State) (Zip) Table I - Non-Derivation (Month/Day) 1 Stock 2. Transact (Month/Day) Table II - Derivation (e.g., put (e.g., put (e.g., put (Month/Day)/Year)) 2. Transaction (e.g., put (Month/Day)/Year)	(First) (Middle) CTOR GROUP LTD. SCAYNE BLVD; 10TH FLOOR FL 33137 (State) (Zip) Table I - Non-Derivative Security (Instr. 3) 2. Transaction Date (Month/Day/Year) 2. Table II - Derivative Security Conversion or Exercise Price of Derivative Security 3. 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Explanation of Responses:

1. On March 1, 2022, the Issuer awarded the Reporting Person a restricted stock grant of 100,000 shares of the Issuer's Common Stock pursuant to the Issuer's 2014 Management Incentive Plan. Restricted shares vest in four equal annual installments on February 24, 2023, February 24, 2024, February 24, 2025 and February 24, 2026, provided the Reporting Person is then still an employee of the Issuer, subject to earlier vesting upon his death or disability, termination of employment without cause or resignation for good reason and change-of-control.

Remarks:

Senior Vice President, Treasurer & CFO

03/03/2022 /s/ J Bryant Kirkland III

** 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.