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SECRETARY OF THE SENATE
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LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

1. Registrant Name Boies, Schiller & Flexner, LLP			
2. Address <input type="checkbox"/> Check if different than previously reported 5301 Wisconsin Avenue, NW Suite 800, Washington, DC 20015			
3. Principal Place of Business (if different from line 2) Armonk NY 10504 City: State/zip (or Country)			
4. Contact Name Michael A. Brille	Telephone (202) 237-2727	E-mail (optional) mbrille@bsflp.com	5. Senate ID # 76638-12
7. Client Name <input type="checkbox"/> Self Altria Corporate Services, Inc.			6. House ID # 36115000

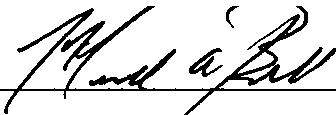
TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-De

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report ⇨ Termination Date 12/31/2003 11. No Lobby

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000)</p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate reporting accounting method. See instructions for description of method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA defined accounting method.</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature  Date **02/10/2004**

Printed Name and Title Michael A. Brille, Administrative Partner

Registrant Name Boies, Schiller & Flexner, LLP Client Name Altria Corporate Services, Inc.

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which t engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each c information as requested. Attach additional page(s) as needed.

15. General issue area code _____ (one per page)

16. Specific lobbying issues


N/A

17. House(s) of Congress and Federal agencies contacted Check if None

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Kimberly J. Tucker	

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature  Date 02/10/2004

Printed Name and Title Michael A. Brille, Administrative Partner

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Registrant Name Boies, Schiller & Flexner, LLP Client Name Altria Corporate Services, Inc

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City _____ State/Zip (or Country) _____

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

Boies, Schiller & Flexner, LLP will no longer act as a lobbyist for this client

Kimberly J. Tucker, Esquire

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

TOB _____ GOV _____ BEV _____ FOO _____

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of I (city and state or c

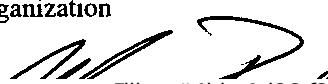
26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the registrant or affiliated organization



Signature *M. A. Brille* Date 02/10/201

Printed Name and Title Michael A. Brille, Administrative Partner