Instruction 1(b)

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to	STATEMENT OF C
Section 16. Form 4 or Form 5	
obligations may continue. See	

## CHANGES 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

ı	nd Address of LEY JUL	f Reporting Person* IE A								r or Tradi <mark>D /DE</mark>					(Ch	elationship of eck all applications of the contractions of the con	able)	g Pers	son(s) to Iss 10% Ov	
(Last) (First) (Middle) 312 WALNUT STREET, 28TH FLOOR						/15/20	004			ction (Mo				Officer (give title Other (specify below) below)						
(Street) CINCINNATI OH 45202 (City) (State) (Zip)				-   4. Ii	f Ame	ndmen	t, Date	e of (	Original F	iled (	(Month/D	Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
				n-Deriv	/ative	e Sec	curiti	es A	cqı	uired, [	Disp	osed (	of, or	Ben	eficial	ly Owned	<u> </u>			
1. Title of Security (Instr. 3) 2. Trans						2A. Deemed Execution Date if any (Month/Day/Ye		3. Transaction Code (Instr		tion	4. Securities Acquired (A Disposed Of (D) (Instr. 3,			(A) or	5. Amou Securitie Benefici	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code	v	Amount	t (	A) or D)	Price	Transac (Instr. 3	tion(s)			(11341.4)
Class A (share	Common Sh	nares, \$.01 par va	alue per													20	I	Trust		
Common Voting Shares, \$.01 par value per share																0			D	
		٦	Γable II -							ired, Di options						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Transaction Code (Instr. 8)		5. Number		6. Date Exercisa Expiration Date (Month/Day/Year			le and	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		mount	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e O S Illy D oi (!)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Da Ex	ite ercisable	Expiration C		OI No of	umber						
Option	\$48.5								05	5/13/2000	05/	/12/2009	Class Comm		,600		7		D	
Option	\$48.94								05	5/18/2001	05/	/17/2010	Class Comm		5,000		7		D	
Option	\$64.32								05	5/10/2002	05/	/09/2011	Class Comm		5,000		7		D	
Option	\$78.01								05	5/09/2003	05/	/08/2012	Class Comm		5,000		7		D	
Phantom Stock	\$100.43									(1)		(1)	Class Comm		0.15 <sup>(1)</sup>		7		D	
Option	\$79.64								04	4/29/2004	04/	/28/2013	Class Comm		5,000		7		D	
Option	\$105.82	04/15/2004			A		1		04	4/15/2005	04/	/14/2014	Class	A E	5,000	(2)	7		D	

## **Explanation of Responses:**

1. Pursuant to the company's 1997 Deferred Compensation and Stock Plan for Directors, directors may defer fees into a phantom stock fund. Under this plan, fees are converted quarterly into phantom shares at the fair market value of the company's Class A Common shares on the last trading day of each quarter. Upon retirement as a director, the balance may be paid in either shares or cash. The balance at 3/31/04 is 5,832.85 phantom shares.

2. The exercise price of this nonqualified stock option award granted under the company's Long Term Incentive Plan is \$105.82.

## Remarks:

/s/ M. Denise Kuprionis, Attorney-in-fact for Julie A. **Wrigley** 

04/16/2004

\*\* Signature of Reporting Person

Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).