## 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

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| Washington, | D.C. | 20549 |

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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |  |
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Estimated average burden hours per response: 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*  DALE ROBERT V  |   |  |   | 2. Issuer Name and Ticker or Trading Symbol CBRL GROUP INC [ CBRL ] |   |                            |          |  |  |                            |                  |                         | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |   |        |  |                                       |
|--|---|--|---|---|---|----------------------------|----------|--|--|----------------------------|------------------|-------------------------|---|--|---|--------|--|---------------------------------------|
| DALE ROBERT V  |   |  |   |   | , |                            |          |  |  |                            |                  |                         | X Direct  |  |   | 10% Ov |  |                                       |
| (Last)<br>305 HAF  | (Fi<br>RTMANN I   | •  | (Middle)  |   |   | Date o<br>/25/2            |          | Trans  | saction (Mon   | th/Da                      | ay/Year)         |                         |   | below  | r (give title<br>)  |        | Other (s<br>below)   | :pеспу                                |
| ,  |   |  |   |   | 4. If                                   |                            |          |  |  |                            |                  |                         | 6. I  | ndividual or Joint/Group Filing (Check Applicable                          |   |        |  |                                       |
| (Street) LEBAN   | TT NC   | N :  | 37087   |   |   |                            |          |  |  |                            |                  |                         | - 1   | X Form filed by One Reporting Person Form filed by More than One Reporting |   |        |  |                                       |
| (City)   | (St   | tate)                                      | (Zip)   |   |   |                            |          |  |  |                            |                  |                         |   | Perso  |   |        | . Gilo riopo   |                                       |
|  |   | Tab  | le I - Nor  | n-Deriv   | ative                                   | Sec                        | curities | s Ac   | quired, D  | isp                        | osed c           | of, or Be               | neficial  | ly Owne  | d   |        |  |                                       |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D |   |  |   | Execution Date,   |   | , Transaction Code (Instr. |          | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) |  | ed (A) or<br>str. 3, 4 and | Benefic<br>Owned | es<br>ally<br>Following | Form<br>(D) o   | n: Direct<br>r Indirect<br>istr. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership   |        |  |                                       |
|  |   |  |   |   |   |                            |          |  | Code   | V Amount                   |                  | (A) o<br>(D)            | Price   | Transac  | eported<br>ansaction(s)<br>estr. 3 and 4)   |        |  | (Instr. 4)                            |
|  |   | Т  |   |   |   |                            |          |  | uired, Dis<br>, options                              |                            |                  |                         |   | Owned  |   |        |  |                                       |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)      | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution D<br>if any<br>(Month/Day | Date,   | 4.<br>Transa<br>Code (1<br>8)           |                            | ı of     |  | 5. Date Exercisa<br>Expiration Date<br>Month/Day/Yea |                            | Amount of        |                         | f<br>g<br>Security  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                        | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | illy   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |
|  |   |  |   | c   | Code                                    | v                          | (A)      |  | Date<br>Exercisable                                  | Ex <sub> </sub>            | piration<br>te   | Title                   | Amount<br>or<br>Number<br>of<br>Shares                                  |  |   |        |  |                                       |
| Stock<br>Options<br>(rights to<br>buy)                   | \$40.25   | 11/25/2003                                 |   |   | A                                       |                            | 5,000    |  | 11/25/2004   | 11/                        | /25/2013         | Common<br>Stock         | 5,000   | \$0  | 0 <sup>(1)</sup>  |        | D  |                                       |

## **Explanation of Responses:**

1. Grant made pursuant to the corporation's 2002 Omnibus Stock and Option Incentive Compensation Plan.

Robert V. Dale

11/26/2003

\*\* 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.