## CRAIN BOHN H

## Form 4

February 25, 2003

FORM 4			OMB APPROVAL				
Check this box if no longer sub to Section 16. Form 4 or For obligations may continue. <i>See</i> Instruction 1(b).	EX( COM	RITIES AND CHANGE MISSION ton, D.C. 20549	OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response0.5				
(Print or Type Responses)		CHANGES	EMENT OF IN BENEFICIAL NERSHIP				
		of the Secur of 1934, Se Public Utility Act of 1935 the Investo	ant to Section 16(a) rities Exchange Act ection 17(a) of the y Holding Company or Section 30(h) of nent Company Act of 1940				
1. Name and Address of Reporting Person *		me <mark>Stonepat</mark> l er or Trading S	h Group, Inc. ymbol STG		6. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
Crain Bohn H. (Last) (First) (Middle)					Director 10% Owner Officer (give title below) Other (specify below)		
1600 Market Street Suite 1515	3. I.R.S. Iden Number of Person, if (Voluntary	Reporting an entity	<ul> <li>4. Statement for Month/Day/Year</li> <li>02/24/2003</li> </ul>		Chief Financial Officer		
(Street) Philadelphia, PA 19103		5. If Amendment, Date of Original (Month/Day/Year)		7. Individual or Joint/Group Filing (Check Applicable Line)			
(City) (State) (Zip)					Form filed by One Reporting Person Form filed by More than One Reporting Person		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1. Title of Security (Instr. 3)	2.Transaction Date (Month/Day/ Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transacti Code (Instr. 8)		p4. Securities Acquired ( Disposed of (D) (Instr. 3, 4, and 5)		D)	Securities Beneficially	6. Owner- ship Form:	7. Nature of Indirect Beneficial	
			Code	v	Amount	(A) or	Price	Owned Following Reported Transaction(s)	Direct (D) or Indirect (I)	Ownership (Instr. 4)	
						(D)		(Instr. 3 and 4)	(Instr. 4)		

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).

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 Control Number.

(Over)

## Edgar Filing: CRAIN BOHN H - Form 4

Form 4 (continued)	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												I	
1. Title of Derivative Security (Instr. 3)	2. Conver- sion or Exer- cise Price of Deriva- tive Security	action Date (Month/ Day/ Year)	3A. Deemed Execu- tion Date, if any (Month/ Day/ Year)	4. Trans- action Code (Instr. 8)		5. Number of Deri- vative		6. Date Exercis- able (DE) and Expiration Date (ED) (Month/ Day/ Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Deriv- ative Security (Instr. 5)	9. Number of Deri- vative Securi- ties Benefi- cially Owned Follow- ing Reported	10
				Code	v	(A)	(D)	DE	ED	Title	Amount or Number of Shares		Trans- action(s) (Instr. 4)	on(s)
Options granted under the Stonepath Group, Inc. Amended and Restated 2000 Stock Incentive Plan	\$1.53	2/24/03		(A)	V	200,000(1)			2/24/13	Common Stock	200,000	-	200,000(2)	

## Explanation of Responses:

(1) Options vest periodically with 50,000 options vesting on July 3, 2003 and the remaining 150,000 options vesting on a pro rata basis for the 36 month period thereafter.(2) Excludes cumulative options to purchase 350,000 shares of common stock granted on January 10, 2002 and July 3, 2002 as previously reported by the Reporting Person.

/s/ Bohn H. Crain

2/25/03

\*\* Signature of Reporting Person

Date

\*\* 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.

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.

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