FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*  BROWN ROBERT G/					2. Issuer Name and Ticker or Trading Symbol SPAR GROUP INC [ SGRP ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner						
(Last) SPAR GI	(Fir	st) (M	Middle)	- 1	3. Date of Earliest Transaction (Month/Day/Year) 09/02/2003									X	belov	v) (	ve title .n, CEO, and I		Other (specify below)  President	
303 SOUTH BROADWAY SUITE 140					4. If Amendment, Date of Original Filed (Month/Day/Year)								· ·	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) TARRYTOWN NY 10591				_										X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(St	ate) (Z	Zip)																	
		Tabl	e I - Non-Deri	vat	ive S	ecu	rities	Acc	quir	ed, D	isposed o	f, or	Benefic	ially	Owne	ed				
1. Title of \$	2. Transaction Date (Month/Day/Ye		2A. Deemde Execution if any (Month/Da		Date,	Cod	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr.			
						Cod	de	v .	Amount	(A) or (D) Price		Reported Transaction (Instr. 3 an		n(s)		4)				
Common	ommon Stock, \$.01 par value 09/02/2003						1	P		100	A	\$7.95	2,129,550		50	I		footnotes		
Common Stock, \$.01 par value 0			09/02/200	3				1			500	A	\$3.92	2,130,050		0	I		footnotes	
Common	nmon Stock, \$.01 par value 09/03/2003			3				1	P		500	A	\$3.99	2,130,550		I(1)(2)(3)		footnotes(1)(2)(3)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	)   C- 8)	Fransaction of Deriva 3)  Beriva Securi Acquir (A) or Disport of (D) (Instr. and 5)			ative ities ired sed	Exp (Mo	iration nth/Da	n Date Pay/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amoun or Numbe of Title Shares		of Derivative Security (Instr. 5) Own Foll Repo		urities For eficially Di led or owing (I) orted 4) isaction(s)		ership n: ct (D) direct istr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- 1. Owned as Trustee under Defined Benefit Pension Trust of SP/R, Inc. (f/k/a SPAR Burgoyne, Inc) under which the Reporting Person is the sole beneficiary.
- 2. Owned as Trustee under Grantor Trust I of Robert G. Brown dated March 22, 1999, for the benefit of Reporting Person's children.
- 3. Owned as Trustee under Grantor Trust II of Robert G. Brown dated March 22, 1999, for the benefit of Reporting Person's children.

/S/ James R. Segreto, as attorney in fact, under POA grant and confirming statement dated Nov 7, 2002.

09/08/2003

\*\* 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.