

Edgar Filing: BRITISH SKY BROADCASTING GROUP PLC - Form 3

BRITISH SKY BROADCASTING GROUP PLC

Form 3

April 25, 2001

U.S. SECURITIES AND EXCHANGE COMMISSION
Washington, DC 20549

FORM 3

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or
Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*

Vivendi Universal S.A.

(Last)

(First)

(Middle)

42, avenue de Friedland

(Street)

75380 Paris, Cedex 08, France

(City)

(State)

(Zip)

2. Date of Event Requiring Statement (Month/Day/Year)

06/10/99

3. IRS Identification Number of Reporting Person, if an Entity (Voluntary)

Not Applicable (foreign entity)

4. Issuer Name and Ticker or Trading Symbol

British Sky Broadcasting Group plc (NYSE: BSYBF)

5. Relationship of Reporting Person to Issuer
(Check all applicable)

Director

10% Owner

Officer (give title below)

Other (specify below)

6. If Amendment, Date of Original (Month/Day/Year)

7. Individual or Joint/Group Filing (Check applicable line)

Form Filed by One Reporting Person

Form Filed by More than One Reporting Person

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Table I -- Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature (Instr.)
Ordinary Shares, nominal value 50p per share	211,874,279	D (see explanatory notes (1) and (3) below)	
Ordinary Shares, nominal value 50p per share	203,607,595	I (see explanatory notes (2) and (3) below)	By BSB Ho

* If the Form is filed by more than one Reporting Person, see Instruction 5(b)(v).

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

(Print of Type Responses)

(Over)

FORM 3 (continued)

Table II -- Derivative Securities Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conve sion
	Amount	

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1. Title of Derivative Security (Instr. 4)	Date Exercisable	Expiration Date	Title	or Number of Shares	Exercise Price of Derivative Security
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Not applicable

Explanation of Responses:

- (1) In September 1999, Vivendi, Canal+ S.A. ("Canal+"), a societe anoyne organized under the laws of the Republic of France and, at such time, 49% owned by Vivendi, and Pathe S.A. ("Pathe"), a societe anoyne organized under the laws of the Republic of France and, at such time, 29% owned by Vivendi, entered into a business combination agreement. The agreement provided for an exchange ratio of 1.5 Vivendi shares for each Pathe share. As a result of the merger, Vivendi acquired ownership of 296,854,733 Issuer Ordinary Shares previously held by Pathe.
- (2) From September 1999 through October 2000, in a series of related transactions, Vivendi indirectly acquired, for a combination of cash and shares of Vivendi stock, 100% of the capital stock of BSB Holdings Limited and, as a result, indirect ownership of 203,607,595 Issuer Ordinary Shares held by BSB Holdings Limited.
- (3) Through the transactions mentioned in Notes (1) and (2) above, and as a result of certain dispositions thereafter, Vivendi currently holds, directly or indirectly, 415,481,874 Issuer Ordinary Shares representing approximately 22.4% of the currently outstanding Issuer Ordinary Shares.

** 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.

VIVENDI UNIVERSAL S.A.

by /s/ Guillaume Hannezo

April 25, 2001

 Name: Guillaume Hannezo
 Title: Chief Financial Officer
 **Signature of Reporting Person

 Date