FORM 4	UNITE	D STATES SE	OMB APPROVAL												
			Was	hingto	n, D.C		OMB Number: 3235-0287								
												Expires: January 31, 2005			
	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP											Estimated average burden			
	P11-1	3 16(-) - ful	C	-1' - TT#11'	hours per response: 0.5										
Check this box if no	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility									one Utility					
longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Holding (Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940													
(Print or Type Responses)															
1. Name and Address of Reporting Pers	son*	2. Issuer Name and Ti	cker or Tr	ading Sym	bol		6. Relationshi	onship of Reporting Person(s) to Issuer							
						(Check all ap	applicable)								
Levin, David A.							X Director	Director10% Owner							
		CASUAL MALE RETAIL GROUP, INC. ("CMRG")								X Officer	Officer Other				
										pelow) (specify below)					
							President and Chief Executive Officer								
(Last) (First) (Middle)	(Last) (First) (Middle)				4. Statem	ent for Mo	onth/Day/Year			7. Individual or Joint/Group Filing (Check appl. line)					
c/o Casual Male Retail Group, Inc.	Security Number of Reporting Person				Δn	ril 30, 2003			X Form filed by One Reporting Person Form filed by More than One						
•	(Voluntary)		5. If Amendment, Date of Original (Month/Day/Year)						Reporting Person						
555 Turnpike Street (Street)															
, ,	5. If Fine-tonicity, Date of Original (Monte Pay/Teal)														
Canton, MA 02021 (City) (State) (Zip)	Table 1 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
					Table 1 -	Non-Dei	ivative securit	ies Acquii	eu, Dispose	d of, of Beller	icially Owned				
1. Title of Security (Inst. 3)		2. Trans- action Date Month/ Day/Year)	action Date Month/ Day/Year)		a. A. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) or Disposed of (D) (Instr. 3, 4 and 5)			Sec Ber Ow Foll Rep Trai	amount of urities deficially ned lowing oorted disactions) at. 3 and 4)	6. Owner- ship Form: Direct (D) or Indirect (I) (Inst. 4)	7. Nature of Indirect Beneficial Ownership (Inst. 4)				
					Code	V	Amount	(A) or (D)	Price		,				
Common Stock, \$0.01 par value		04/30/03			D		53,147	D	\$4.43	212,	353	D			
Common Stock, \$0.01 par value										15,5	500	I	*		
Explanation of Responses:		<u> </u>													
* By spouse's IRA account															
Reminder: Report on a separate line for	each class of securities b	peneficially owned dire	ctly or inc	lirectly.											

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

Potential persons who respond to the collection of information contained

(Over)

in this form are not required to respond unless the form displays

SEC 1474 (9-02)

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Form 4 (continued)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

Ir-							,							
1. Title of Derivative Security (Inst. 3)		3A.Deemed Execu-tion Date, if any (Month/ Day/ Year)		4. Trans- action Code (Inst. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Inst. 3,4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Inst. 3 and 4)		8. Price of Deriva- tive Secur- ity (Inst. 5)	9. Number of Deriva- tive Securities Bene- ficially Owned Following Reported Trans- action(s) (Inst. 4)	10.Owner- ship Form of Deriva- tive Security: Direct (D) or Indirect (I) (Inst. 4)	11.Nature of Indirect Benefi- cial Owner- ship (Inst. 4)
			Code	V	(A)	(D)	Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares		(1131. 4)		
	i		1											

Explanation of Responses:

 $NOTE: Reporting \ person \ has \ previously \ reported \ grants \ of \ options \ to \ purchase \ an \ aggregate \ of 500,000 \ shares \ of \ the \ Issuer's \ common \ stock.$

	/s/ ARLENE C. FELDMAN		May 2, 2003		
** Intentional misstatements or omissions of facts constitute Federal Criminal Violations.		** Signature of Reporting Person	Date		
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.		Arlene C. Feldman Attorney-in-Fact for			
If space provided is insufficient, see Instruction 6 for procedure.		David A. Levin			
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 valid OMB number.					