Instruction 1(b)

## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL							
OWNERSHIP							

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

Form 3	Holdings Repo	rted.												Lilou	13 pci	гезропас.		1.0	
_	Transactions R		File	ed pursuant to or Sectior															
1. Name and Address of Reporting Person*  MITCHELL MARTHA M			2. Issuer Name <b>and</b> Ticker or Trading Symbol CBRL GROUP INC [ CBRL ]						5. Relationship of Reporting (Check all applicable)  X Director				Person(s) to Issuer						
(Last) 305 HAR	(Fir	,	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 07/29/2005						/Year)		Office below	e	Other (specify below)					
(Street) LEBANC (City)	ON TN		7087 Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)							.ine)	Individual or Joint/Group Filing (Check Applicable le)  X Form filed by One Reporting Person Form filed by More than One Reporting Person							
		Tabl	e I - Non-Deriv	ative Sec	uritie	es Ac	quire	ed, Di	sposed	of, or	Benefici	ally	/ Owne	ed					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		Execution Date, if any		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Disposed	5. Amou Securitie Benefici Owned a		es ally	Form	6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership			
				, ,	,,,,,			Amour	it	(A) or (D)	Price		Issuer's Year (Ins 4)	Fiscal lindi				Instr. 4)	
Common Stock										3,163.948 <sup>(1)</sup>				D					
	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)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Dispo of (D (Instrand !	r osed ) r. 3, 4 5)	6. Date Exercisable Expiration Date (Month/Day/Year)		ation Date th/Day/Year)  Expiration		le and unt of rrities rrities rritying vative rity (Instr. 3 4)  Amount or Number of Shares	unt per		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	ip o B ) O ct (I	1. Nature of Indirect Beneficial Dwnership Instr. 4)	

## **Explanation of Responses:**

1. 13.948 represents shares previously purchased under the Company's Dividend Reinvestment Program. Ms. Mitchell has cancelled her enrollment in the program and will not be making any further purchases as part of the program.

> Martha M. Mitchell by Linda Vantrease, Attorney-in-Fact

08/22/2005

\*\* 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.