FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>TAYLOR NANCY M</u>														5. Relationship of Repor (Check all applicable) Director				10%	Owner	
(Last) (First) (Middle) TREDEGAR CORPORATION 1100 BOULDERS PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 10/31/2003									- X Officer (give title Other (specify below) Vice President					
(Street) RICHMOND VA 23225 (City) (State) (Zip)					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Oity)	(5			on-Deriv	ative	Sec	uritie	s Ac	auirea	d. Dis	sposed o	f. or B	enefic	ially	/ Owne	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a 5)			r 5. Amount of Securities Beneficially Owned Following		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
						Code V		Amount (A) or (D)		Price	:	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Tredegar Common Stock			10/31/2003				S		900	D	\$15	15.53 14,		,450		D				
Tredegar Common Stock			10/31/2003				S		4,700	D	\$15	5.5	.5 9,750			D				
Tredegar Common Stock														-	10		I	By Son ⁽¹⁾		
Tredegar Common Stock														-	10		I	By Son ⁽²⁾		
Tredegar Common Stock															-	10			By Daughter ⁽³⁾	
Tredegar Common Stock															21	,893			401(k) Plan ⁽⁴⁾	
		T	able II ·								osed of, convertib				Owned					
Derivative Security (Instr. 3) Date (Month/Day/Year) Price of Derivative Security Date (Month/Day/Year) (Month/Day/Year)		4. Transac Code (li 8)	Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	tion Day/Y	Securities Underlying Derivative Security (Instr. and 4) Amour or Numbe of		t of ies ying ive y (Instr. : Amount or Number	-		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)					

Explanation of Responses:

- 1. Held by me as custodian for John Spencer Taylor, Jr.
- 2. Held by me as custodian for Thomas V. M. Taylor
- 3. Held by me as custodian for Evelyn M. Taylor

4. Equivalent shares as reported by the Tredegar Corporation Retirement Savings Plan (the "Savings Plan") trustee. The Savings Plan maintains its records through unit accounting and not share accounting. Therefore, the number of equivalent shares can fluctuate up or down depending upon the unit value within the trust solely as a result of a change in the fair market value of Tredegar stock even if the employee takes no action in the Savings Plan. The amount reported includes units acquired in exempt transactions under Rule 16b-3 pursuant to the Savings Plan during the period from October 22, 2003 through October 31, 2003

Remarks:

Patricia A. Thomas, Attorney-

11/04/2003

** 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.