FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-0 | | | | | | | |
| 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* Cohen Lyor 2. Date of Ever Requiring State (Month/Day/Yes 05/11/2005 | | | | nent | 3. Issuer Name and Ticker or Trading Symbol Warner Music Group Corp. [WMG] | | | | | | | |
|--|--|-------|---|-----------------|--|---|---|------------------------------|--|---|---|--|
| (Last) C/O WARNEI | (Last) (First) (Middle) C/O WARNER MUSIC GROUP CORP. | | | | | ationship of Reporting Perso (all applicable) Director | 10% Owner | | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | | |
| 75 ROCKEFE | LLER PLAZA | | | | X | Officer (give title below) | Other (spe | , | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | |
| (Street) NEW YORK | NY | 10019 | | | | CEO, U.S. Recorde | ed Music | | X | | y One Reporting Person y More than One erson | |
| (City) | (State) | (Zip) | | | | | | | | | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | | | ınt of Securities ially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Common Stock, par value 0.001 per share | | | | | | 2,390,102.2286 | D | | | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 4) | | | 2. Date Exercisable an Expiration Date (Month/Day/Year) | | 3. Title and Amount of Secur Underlying Derivative Secur | | ity (Instr. 4) Conv | | rsion rcise | 5. Ownership Form: | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | |
| | | | Date Exercisable | Expiration Date | n Title | • | Amount or Number of Shares | Price of Deriva Securi | tive | Direct (D) or Indirect (I) (Instr. 5) | | |

Explanation of Responses:

/s/ Lyor Cohen

05/11/2005

** 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 5 (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.