## Edgar Filing: COHEN & STEERS INC - Form 4

COHEN & S'	TEERS INC										
Form 4											
June 24, 2016	5										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										PPROVAL	
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box						Expires:	January 31,				
if no longer subject to STATEMENT OF CHANG				GES IN BENEFICIAL OWNERSHIP OF					Estimated average		
Section 16. SECURITIES							burden hours per				
Form 4 or	<del>.</del>								response 0.8		
Form 5 obligation	10	<b>^</b>						ge Act of 1934,			
may conti				•	•	• •		f 1935 or Sectio	n		
<i>See</i> Instru 1(b).		30()	h) of the Inv	vestment	Company	y Act	of 19	40			
(Print or Type R	lesponses)										
Harvey Joseph M Symbol								5. Relationship of Reporting Person(s) to Issuer			
			COHEN	& STEE	RS INC	[CNS	<b>S</b> ]	(Chec	ck all applicable	e)	
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	insaction						
				Month/Day/Year)				Director 10% Owner X_ Officer (give title Other (specify			
280 PARK A	AVE, 10TH F	LOOR	06/23/20	)16				below)	below) President	er (speeny	
	(Street)		4. If Amer	ndment, Dat	e Original			6. Individual or Jo	oint/Group Filii	1g(Check	
				(Month/Day/Year)				Applicable Line)			
NEW YORK	K, NY 10017							_X_ Form filed by 0 Form filed by N Person			
(City)	(State)	(Zip)	Tabl	I Non D		'	tion A a	awined Disposed a	f on Donoficial	Ur Ormod	
							ties Ac	quired, Disposed o		-	
1.Title of Security	2. Transaction		eemed tion Date, if	3. Transactic	4. Securi		r	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect	
(Instr. 3)	(Month/Day/Year) Execut any		nion Date, n	ion Date, if TransactionAcquired (A) or Code Disposed of (D)				Beneficially		Beneficial	
× /		•	th/Day/Year)					Owned	Indirect (I) Own	Ownership	
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common											
Stock	06/23/2016			А	673 <u>(1)</u>	А	\$0	1,317,745	D		

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

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 control number.

 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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Harvey Joseph M 280 PARK AVE, 10TH FLOOR NEW YORK, NY 10017			President				
Signatures							
/s/ Francis C. Poli, Attorney-in-Fact	00	5/24/2016					
<u>**Signature of Reporting Person</u>		Date					

## **Explanation of Responses:**

- \* 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).
- (1) Represents the acquisition of dividend equivalent restricted stock units in connection with the issuer's second quarter 2016 dividend and acrued to the reporting person on unvested restricted stock units granted in January 2013, January 2014, January 2015 and January 2016.

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.