Edgar Filing: COHEN & STEERS QUALITY INCOME REALTY FUND INC - Form 3

COHEN & STEERS QUALITY INCOME REALTY FUND INC Form 3 October 09, 2015 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

 Name and Address of Reporting Person <u>*</u> Â Maginnis Gerald J. 			2. Date of Event Requiring Statement (Month/Day/Year) 10/00/2015		³ 3. Issuer Name and Ticker or Trading Symbol COHEN & STEERS QUALITY INCOME REALTY FUND INC [RQI]			
rst)	(Middle)	10/09/2013		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
280 PARK AVENUE, 10TH FLOOR ^(Street) NEW YORK, NY 10017				(Check all applicable)			Theo(wona) Day Tear	
			Director 10% Owner Officer Other (give title below) (specify below)		•	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
ate)	(Zip)		Table I - N	lon-Deriva	tive Securiti	es Bei	neficially Owned	
					3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	•	
Common Stock, par value \$0.001 per share		per share	0		D	Â		
lirectly. Person informa require	s who resp ition conta d to respoi	oond to the c ined in this f nd unless the	ollection of orm are not e form displa		SEC 1473 (7-02)		
	ald J. rst) NUE,Â eet) NYÂ 10 ate) par valu a separat lirectly. Persona informa require	ald J. rst) (Middle) NUE, 10TH eet) NYÂ 10017 ate) (Zip) par value \$0.001 p a separate line for eac lirectly. Persons who resp information conta required to respon	ald J. (Month/Day/Y) ald J. (Month/Day/Y) rst) (Middle) NUE, 10TH eet) NYÂ 10017 ate) (Zip) par value \$0.001 per share a separate line for each class of seculirectly. Persons who respond to the criinformation contained in this f	Statement ald J. (Month/Day/Year) 10/09/2015 rst) (Middle) NUE, 10TH eet) NYÂ 10017 ate) (Zip) Table I - N 2. Amount of Beneficially (Instr. 4) par value \$0.001 per share 0 a separate line for each class of securities beneficilirectly. Persons who respond to the collection of information contained in this form are not	Statement COHEN & COHEN & FUND INCOMPANY ald J. (Month/Day/Year) rst) (Middle) NUE, 10TH (Check eet)	Statement COHEN & STEERS Q ald J. (Month/Day/Year) 10/09/2015 FUND INC [RQI] rst) (Middle) NUE, 10TH (Check all applicable) eet)	Statement COHEN & STEERS QUALI ald J. (Month/Day/Year) 10/09/2015 FUND INC [RQI] rst (Middle) NUE, 10TH (Check all applicable) eet) Officer Officer Oother (give title below) (specify below) NYÂ 10017 Table I - Non-Derivative Securities Beneficially Owned (Instr. 4) Ownership 2. Amount of Securities 3. 4. Nat Beneficially Owned Ownership Owner (Instr. 4) Form: (Instr. Direct (D) Or Indirect (I) a separate line for each class of securities beneficially SEC 1473 (7-02) Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a SEC 1473 (7-02)	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of	1	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		(1150.4)	FILCE OI	Derivative	
		Title	Derivative	Security:	

January 31,

2005

0.5

Expires:

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Date	Expiration	Amount or	Security	Direct (D)
Exercisable	Date	Number of	•	or Indirect
		Shares		(I)
				(Instr. 5)

Reporting Owners

Reporting Person

Reporting Owner Name / Addres	5	Relationships				
		10% Owner	Officer	Other		
Maginnis Gerald J. 280 PARK AVENUE 10TH FLOOR NEW YORK, NY 10017	Â	Â	Â	Â		
Signatures						
Tina M. Payne 10	/09/2015					
<u>**</u> Signature of	Date					

Explanation of Responses:

* 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. 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.