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COWEN GR Form 4 March 14, 20												
FORM												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check thi							Expires:	January 31,				
if no longer subject to STATEMENT OF CHAN				NGES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 average		
Section 16.					SECURITIES					rs per		
Form 4 or Form 5			G .: 1.		G	· •	1		response	0.5		
obligation							-	ge Act of 1934,				
may cont	inue. Section 17(3) of the In	•	•	· ·		f 1935 or Sectio	n			
See Instru 1(b).	uction	50(II) of the m	vestment	Compan	y Aci	. 01 19	+0				
1(0).												
(Print or Type F	Responses)											
1. Name and A	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to							
SOLOMON JEFFREY M Syr					Issuer							
			COWEN	OWEN GROUP, INC. [COWN]				(Check all applicable)				
(Last)	(First) (N	Aiddle)	3. Date of	Earliest Tra	ansaction					·		
				Ionth/Day/Year)				_X_ Director 10% Owner _X_ Officer (give title Other (specify				
			03/10/20	03/10/2017				below) below)				
LEXINGTON AVENUE								President				
(Street) 4. If			4. If Amer	. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(M				ed(Month/Day/Year)				Applicable Line)				
X Form filed by C							One Reporting Person Iore than One Reporting					
NEW YORI	K, NY 10022							Person		1 8		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Date			3. 4. Securities Acquired					7. Nature of			
Security	(Month/Day/Year)		Execution Date, if any (Month/Day/Year)		Transaction(A) or Disposed of Code (D)			Securities	Form: Direct			
(Instr. 3)		•				(D) (Instr. 3, 4 and 5)		-	(D) or Indirect (I)	Beneficial Ownership		
						Following	(Instr. 4)	(Instr. 4)				
			(A)			Reported						
						or		Transaction(s) (Instr. 3 and 4)				
Class A				Code V	Amount	(D)	Price	, , ,				
Class A Common	03/10/2017			F	5,873	D	\$	642,194	D			
Stock	03/10/2017			1	(1)	D	13.4	0+2,194	D			
DIOUK												

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 Derivat Securit <u></u> (Instr. 3	tive Convers y or Exerc	cise ive	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne 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 / Addre	ess	Relationships						
	Director	10% Owner	Officer	Other				
SOLOMON JEFFREY M COWEN GROUP, INC. 599 LEXINGTON AVENU NEW YORK, NY 10022	E X		President					
Signatures								
/s/ Jeffrey M. Solomon	03/14/2017							
<u>**</u> Signature of	Date							

Reporting Person 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).
- Represents shares of the Issuer's Class A common stock withheld to satisfy tax withholding obligations upon the vesting of restricted
 (1) stock, in accordance with the terms of the related grant agreement, which was approved by the board of directors of the Issuer in accordance with Rule 16b-3 promulgated under the Securities Exchange Act of 1934.

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.