Edgar Filing: COUSINS PROPERTIES INC - Form 4

COUSINS PI Form 4 February 04,	ROPERTIES IN 2016	IC									
FORM	Δ									PPROVAL	
	UNITED	STATES		ITIES Al hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this									Expires:	January 31,	
if no longer subject to STATEMENT OF			F CHAN	F CHANGES IN BENEFICIAL OWN					Estimated a	2005 average	
Section 16.				SECURITIES					burden hou		
Form 4 or Form 5		report to	Section 16	S(n) of the	Socurit		vohono	e Act of 1934,	response	0.5	
obligation	¹⁸ Section 17						-	f 1935 or Section	n		
may conti <i>See</i> Instru	nue.		of the Inv	•	•	· ·					
1(b).	etion					-					
(Print or Type R	esponses)										
	ddress of Reporting	g Person <u>*</u>	2. Issuer	Name and	Ticker or	Tradin	ıg	5. Relationship of	Reporting Pers	son(s) to	
Roper Pamel	la F		Symbol	pol				Issuer			
			COUSIN [CUZ]	NS PROP	ERTIES	INC		(Check all applicable)			
(Last) (First) (Middle) 3. Date of			3. Date of	f Earliest Transaction				Director		Owner	
				Day/Year)				XOfficer (give titleOther (specify below) below)			
NE, SUITE :	TREE STREET		02/02/20)16				Senio	r Vice Presider	nt	
NE, SUITE .											
			ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check				
Filed(Mont							Applicable Line) _X_ Form filed by One Reporting Person				
ATLANTA,	GA 30303							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative	Securi	ities Acc	quired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security	2. Transaction Date 2A. Dee (Month/Day/Year) Execution		med	3. Transactio	4. Securi	ties A	cquired	5. Amount of	6. Ownership Form: Direct	7. Nature of	
(Instr. 3)	, ,	Day/Year)	Code (Instr. 8)	(D)			Owned	(D) or Indirect (I)	Beneficial Ownership		
						(A)		Following Reported	(Instr. 4)	(Instr. 4)	
				Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	02/02/2016			F <u>(1)</u>	1,141	D	\$ 8.42	40,310 <u>(2)</u>	D		
Stock							0.42				

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. Transact Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amou Unde Secur	le and unt of rlying tities . 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		

Edgar Filing: COUSINS PROPERTIES INC - Form 4

Reporting Owners

Reporting Owner Name / Addre	Relationships						
	Director	10% Owner	Officer	Other			
Roper Pamela F 191 PEACHTREE STREET N SUITE 500 ATLANTA, GA 30303	١E		Senior Vice President				
Signatures							
/s/ Pamela F. 0 Roper 0	2/04/2016						

**Signature of Reporting Person 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).
- Shares withheld from the vesting of restricted stock to pay the reporting person's tax liability as permitted under the 2009 Incentive Stock (1) Plan.

Includes 26,052 restricted stock awarded under the Cousins Properties Incorporated (CPI) 2009 Incentive Stock Plans. While the shares (2) are being held prior to vesting, the reporting person will have the right to receive all cash dividends and to vote the restricted shares. All unvested shares will forfeit upon termination of employment.

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.