Edgar Filing: COHEN & STEERS INC - Form 4

COHEN & S	TEERS INC												
Form 4													
June 26, 2015	5												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION											PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB Number:	3235-028		
Check thi				0	,					Expires:	January 31,		
if no longer STATEMENT OF CHANG					ES IN BENEFICIAL OWNERSHIP OF						2005		
subject to Section 10					SECURITIES						Estimated average burden hours per		
Form 4 or							response	•					
Form 5	Filed	bursuant t	o Section 16	5(a) of	the	Securiti	es Ez	cchang	ge Act of 1934,	reepeneen	0.0		
obligation	¹⁸ Section	L						•	f 1935 or Sectio	n			
may conti <i>See</i> Instru	nue.		h) of the Inv	•		•	- ·						
1(b).	letton	Ì				1.	·						
(Print or Type R	lesponses)												
1 Nome and A	ddress of Report	ing Donson *							5 Deletionship of	Donorting Dor	aan(a) to		
Glickson Joł	-	ing reison _							5. Relationship of Issuer	Reporting Fer	soli(s) to		
Unekson joi	iii 10uu		Symbol										
COHEN				EN & STEERS INC [CNS]					(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest	Tra	insaction							
				nth/Day/Year)					Director 10% Owner				
280 PARK A	AVE, 10TH F	LOOR	06/25/20)15					X Officer (give below)	below)	er (specify		
									· · · · · · · · · · · · · · · · · · ·	or Vice Presider	nt		
	(Street)		4. If Amer	ndment,	Dat	e Original			6. Individual or Jo	oint/Group Filin	ng(Check		
				Month/Day/Year)					Applicable Line)				
									X Form filed by (
NEW YORK	K, NY 10017								Form filed by M Person	More than One Re	eporting		
(City)	(State)	(Zip)	Tabl	I Nor	• D		loouri	tios A a	quired, Disposed of	f or Bonoficio	lly Owned		
1.Title of	2. Transation	D-4- 24 F			1-DC			ites Ac			-		
Security	2. Transaction (Month/Day/Y		ution Date, if	3. Transa	actio	4. Securit		r		6. Ownership Form: Direct	Indirect		
(Instr. 3)	(Wondi/Day/1	any	ation Date, n	TransactionAcquired (A) or Code Disposed of (D)						(D) or	Beneficial		
· · ·		•	(Month/Day/Year)		(Instr. 8) (Instr. 3, 4 and 5)				•	Indirect (I)	Ownership		
										(Instr. 4)	(Instr. 4)		
							(A)		Reported				
							or		Transaction(s) (Instr. 3 and 4)				
~				Code	V	Amount	(D)	Price	(msu. 5 and 4)				
Common	06/25/2015			А		23 (1)	А	\$0	10,358	D			
Stock													

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)	4. Transact Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,			Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	4, and 5)	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				
Glickson John Todd 280 PARK AVE, 10TH FLOOR NEW YORK, NY 10017			Senior Vice President					
Signatures								
/s/ Francis C. Poli, Attorney-in-Fact	00	5/26/2015						
<u>**</u> 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).
- (1) Represents the acquisition of dividend equivalent restricted stock units in connection with the issuer's second quarter 2015 dividend and acrued to the reporting person on unvested restricted stock units granted in January 2015.

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.