## Edgar Filing: COWEN GROUP, INC. - Form 4

COWEN GI	ROUP, INC.											
Form 4												
May 21, 201	4											
FORM	14									OMB A	PROVAL	
	UNITE	D STATE				ND EXC D.C. 205		NGE C	COMMISSION	OMB Number:	3235-0287	
Check this box										Expires:	January 31, 2005	
if no longer subject to Section 16. Section 16.				GES IN BENEFICIAL OWNERS SECURITIES					NERSHIP OF	Estimated average burden hours per		
Form 4 c										response		
Form 5	Filed	pursuant to	Section 1	6(a) of	the	e Securiti	es Ex	chang	e Act of 1934,	·		
obligatio may con				•		•	- ·		f 1935 or Section	n		
<i>See</i> Instr 1(b).		30(h	) of the In	vestme	nt (	Company	y Act	of 194	40			
(Print or Type	Responses)											
TT-1T-1T			2. Issuer Symbol	Issuer Name <b>and</b> Ticker or Trading nbol					5. Relationship of Reporting Person(s) to Issuer			
			COWEN	N GRO	UF	P, INC. [0	COW	N]	(Chec	k all applicable	•)	
(Last)	(First)	(Middle)	3. Date of	Earliest	Tra	ansaction			(Chee	k all applicable	<i>(</i> )	
				onth/Day/Year) 16/2014					Director 10% Owner X_ Officer (give title Other (specify			
			00/10/2						below) Chief Ada	below) ministrative Of	ficer	
(Street) 4. If Am			4. If Ame	Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Yo	ear)				Applicable Line) _X_ Form filed by C	One Reporting Pe	rson	
NEW YOR	K, NY 10022								Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non	-De	erivative S	Securit	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		Transaction Date 2A. Deemed Ionth/Day/Year) Execution Date, if any (Month/Day/Year)		3.4. Securities AcquiredTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8)					Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Class A							. ,	\$				
Common Stock	05/16/2014			F		18,485 (1)	D	\$ 3.83	530,188	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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under 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**

<b>Reporting Owner Name / Address</b>	Relationships								
	Director	10% Owner	Officer	Other					
Holmes John J 599 LEXINGTON AVENUE NEW YORK, NY 10022		Chief Administrative Officer							
Signatures									
/s/ John Holmes 05	/20/2014								

/s/ John Holmes 0

<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).

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.