Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Explanation of Responses:

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

(Print or Ty	pe Response	es)										1						
1. Name and Address of Reporting Person *- Malamed Adam Scott						2. Issuer Name and Ticker or Trading Symbol LADENBURG THALMANN FINANCIAL SERVICES INC [LTS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 4400 BISCAYNE BLVD., 12TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 01/14/2016							Chief Operating Officer					
(Street) MIAMI, FL 33137					4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of Security (Instr. 3)			2. Trans Date (Month/	action /Day/Year)	Execution any	A. Deemed xecution Date, if ny Month/Day/Year)		(Instr. 8)		4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5) (A) or Amount (D) P		5. Amount of Beneficially C Reported Trar (Instr. 3 and 4	Owned Following nsaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
Common Stock 01/14/201			2016			A		125,0	` ′		603,478			D				
Common Stock									Ш			5,000			I	Held by the NFS/FMTC IRA for the benefit of Adam Malamed		
8.00% Series A Cumulative Redeemable Preferred Stock										4	4,000 (2)			D				
Security (Instr. 3)	Conversion	3. Transactic Date (Month/Day/	Execu Year) any	3A. Deemed Execution Date, i		5. 1 tion of Der (A) Dis (D) (In:	Number 6. Date Expira (Monticurities equired c.) or sposed of		isposed of, or Benes, convertible secur e Exercisable and tion Date h/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Derivati Securiti Benefic Owned Followi Reporte	es Fornially Derivent Secung or Intion(s)	nership n of	11. Natur of Indire Beneficia Ownersh (Instr. 4)	
					Code	V (A) (D)		sable I	Expiration Date	Title	Amoun or Numbe of Shares						
Stock Option (Right to Buy)	\$ 2.65	01/14/20	01/14/2016		A				3) 0	01/14/2026		mon ock 50,000	\$ 0	50,0	000	D		
Repor	ting O	wners																
Reporting Owner Name / Address					Relationships													
Malamed Adam Scott 4400 BISCAYNE BLVD., 12TH FLOOR MIAMI, FL 33137					10% Owner Officer Chief Operation			rating (Officer	Other								
Signa	tures																	
/s/ Adam	S. Malam	ed	01/19/201	16														
	of Reporting Pers		Date															

- * 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).
- Restricted shares of common stock issued pursuant to the issuer's Amended and Restated 2009 Incentive Compensation Plan. Restricted shares vest in four equal annual installments (1) commencing on the first anniversary of the date of grant provided Mr. Malamed is then still an employee of the issuer, subject to earlier vesting upon his death or disability or a change of control of the issuer.
- (2) The 8.00% Series A Cumulative Redeemable Preferred Stock is convertible into common stock at a non-fixed conversion rate in connection with a change of control as described in the issuer's Current Report on Form 8-K, filed with the Securities and Exchange Commission on May 24, 2013.
- (3) The option will vest in four equal annual installments commencing on the first anniversary of the date of grant provided that Mr. Malamed is then still an employee of the issuer, subject to earlier vesting upon his death or disability or a change of control of the issuer.

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.