FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name ar		es)															
1. Name and Address of Reporting Person * BEINSTEIN HENRY C				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) _X_ Director Officer (give title below) Other (specify below)						
C/O GAO THE AM	SNON SEC	CURITIES, 1370		3. Date o		est Tr	ansactio	on (Month	/Day/Y	ear)							
(Street) NEW YORK, NY 10019				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						ired, Disposed of, or Beneficially Owned							
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		e, if	3. Trans Code (Instr. 8	((A) or Disposed (Instr. 3, 4 and 5)		of (D) Owned Foll		ed Follow action(s)			Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	V	Amount	(A) or (D)	Price					(I) (Instr. 4)	
Common	Stock		03/23/2016				M	2	20,000	A	\$ 1.39	102,1	143 (1)			D	
Common	Stock											1,532	2			I	Held by Spouse's IRA
			Table II - 1					contai form d	ned in isplay: osed of	this for s a curre , or Bene	m are i ently v eficially	not re	equired OMB co	of inform to respor entrol num	ıd unless t		1474 (9-02)
1 Title of	2	3 Transaction	(e.g., put	s, calls	, war	rants, o	contai form d red, Disp ptions, co	ned in lisplays osed of onvertil	this forms a curre , or Bene ole secur	m are i ently v eficially ities)	not revalid (equired OMB co	to respon	nd unless t	ne	, , , ,
Security	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	5. tion of D S A (I) (I)	, war . Num	nber 6 Itive (ties red sed of	contai form d	ned in lisplays osed of onvertil ercisabl Date	this forms a current, or Beneble secur	ently verticially ities) 7. Titl Amou Under Securi	Owner and ont of rlying ities . 3 and	equired OMB co ed	8. Price of Derivative Security (Instr. 5)	ıd unless t	of 10. Owners Form of Derivat Security Direct (or Indir	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	5. tion D D S A (A (I (I (I an	. Num f Derivate ecurit (cquir (A) or Dispos (D) (Instr. 1)	rants, on the state of the stat	contai form d red, Disp ptions, co b. Date Ex Expiration	ned in lisplays osed of onvertil ercisabl Date hy/Year	this forms a current of the security of the se	ently verticially ities) 7. Titl Amou Under Securi	not revalid (Committee and International Committee and Int	equired OMB co	8. Price of Derivative Security (Instr. 5)	9. Number Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners Form of Derivat Security Direct (or Indirect)	11. Natur of Indirec Beneficia Ownershi (Instr. 4)

Reporting Owners

Donastina Commun Nama / Addings	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BEINSTEIN HENRY C C/O GAGNON SECURITIES 1370 AVENUE OF THE AMERICAS NEW YORK, NY 10019	X					

Signatures

/s/ Henry C. Beinstein	03/24/2016
**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).
- (1) Includes 22,143 shares of common stock that were erroneously omitted from prior reports.

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.