## Edgar Filing: B. Riley Financial, Inc. - Form 4

B. Riley Fina	ncial, Inc.											
Form 4												
May 09, 2016	5											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								ONID	3235-0287			
Check this	s box		was	nington,	D.C. 20:	549			Number:	January 31,		
if no longe	or	ENT OF	CITAN		DENIET	CIA		NERSHIP OF	Expires:	2005		
subject to						CIA		NEKSHIP OF	Estimated a	average		
Section 16 Form 4 or	ection 16. SECURITIES							burden hours per				
Form 5								response	0.5			
obligation	· ·							of 1935 or Sectio	\n			
may conti	nue.			vestment	•	· ·			/11			
See Instru- 1(b).	ction	50(11) 01		content	compun	y 1100	. 01 17	10				
1(0).												
(Print or Type R	esponses)											
1. Name and Address of Reporting Person       2. Issuer Name and Ticker or Trading       5. Relationship of							Reporting Person(s) to					
Forman Alar	n N	S	ymbol					Issuer				
		В	B. Riley	Financia	l, Inc. [R	ILY]		(Che	ck all applicable	<b>a</b> )		
(Last)	(First) (M	liddle) 3.	. Date of	Earliest Tra	ansaction			(Chee	ck all applicable			
		(1	Month/Da	y/Year)				Director		6 Owner		
C/O B. RILEY FINANCIAL, 05/05/2								XOfficer (give titleOther (specify below)				
INC., 21860 BURBANK BLVD.,								· · · · · · · · · · · · · · · · · · ·	eneral Counsel,	Sec.		
SUITE 300 S	SOUTH							,	,			
(Street) 4. If A				Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
		F	iled(Mont	(Month/Day/Year)				Applicable Line)				
_X_ Form filed by						One Reporting Person fore than One Reporting						
WOODLAN	D HILLS, CA 91	.367						Person	More than One R	eporung		
(City)	(State) (	Zip)	Table	I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	2A. Deeme	ed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)		Transactio	onAcquired	l (A) c	or	Securities	Form: Direct	Indirect			
(Instr. 3)		any	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially	(D) or	Beneficial		
		(Month/Da						Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
								Reported	(1130.4)	(Instr. 4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common	0510510016				3,000		\$	17 001	D			
Stock	05/05/2016			Р	<u>(1)</u>	А	<b>9</b> .5	17,201	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	ionNumber Expiration of (Month/Da			te Amount of		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
Repo	rtina O	wners		Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Other			
Forman Alan N C/O B. RILEY FINANCIA 21860 BURBANK BLVD., WOODLAND HILLS, CA	SUITE 300 SOUTH			EVP, General Counsel, Sec.				
Signatures								
/s/ Alan N. Forman	05/09/2016							
**Signature of	Date							

\*\*Signature of Reporting Person

## **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 shares purchased as part of public offering of common stock by 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.