| Cowen Grou | p, Inc. | | | | | | | | | | |
|--|--|-----------------|---|---|---------------|---|----------------------|--|--|------------------------|--|
| Form 4 November 20 | 5, 2007 | | | | | | | | | | |
| FORM 4 OMB APPROVAL UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB Number: Check this box 3235-0 Check this box January | | | | | | | | OMB | 3235-0287 | | |
| | | | | | | | | | | | |
| (Print or Type F | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> McCarthy J Kevin | | | 2. Issuer Name and Ticker or Trading Symbol | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) | (Middle) | Cowen Group, Inc. [COWN] 3. Date of Earliest Transaction | | | | | (Check all applicable) | | | |
| COWEN GI AVENUE C | (Month/Day/Year) 11/26/2007 | | | | | Director 10% Owner X_ Officer (give title Other (specify below) below) General Counsel | | | | | |
| | | | | If Amendment, Date Original ed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by Mare then One Reporting | | | |
| NEW YORK, NY 10020 — Form filed by More than One Reporting Person | | | | | | | | | porting | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) |) Execution any | on Date, if | 3. Transactic Code (Instr. 8) | (Instr. 3, | 4 and (A) or | d of (D) 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Indirect Beneficial | |
| Common Stock | 11/26/2007 | | | Code V P | Amount 400 | (D) A | Price \$ 10.08 | 4,222 | D | | |
| Common Stock | 11/26/2007 | | | Р | 100 | А | \$ 10.09 | 4,322 | 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.

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 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. Transacti Code (Instr. 8) | 5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | ; | Date | Amou Unde Secur | le and unt of rlying rities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|--|---------------------|--------------------|-----------------------|--|---|---|
| | | | | Code V | 7 (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | |
|---|--|---------------|-----------|-----------------|-------|--|--|--|
| | | Director | 10% Owner | Officer | Other | | | |
| 1221 AVENUE OF | McCarthy J Kevin COWEN GROUP, INC. 1221 AVENUE OF THE AMERICAS NEW YORK, NY 10020 | | | General Counsel | | | | |
| Signatures | | | | | | | | |
| /s/ J. Kevin McCarthy | 11/26/2007 | | | | | | | |
| <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).

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.