GOULD MATTHEW	J	
Form 4		

Revision No.: 2015-08-26

Client Reference Number:

## FORM 4

V

V

Shares of Beneficial Interest

08/26/2015

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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By children (2)

By Gould Family Trust

By Gould Shenfeld

Family Foundation (4)

As custodian (5)

By Gould Investors L.P.

(6)

1,140

33,259

23,469

47,633

2,890,576.77

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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * GOULD MATTHEW J				2. Issuer BRT REALTY	TRUST	Tick [BR	ter or Trading Syn	nbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 60 CUTTER	t) (First) (Middle) 60 CUTTER MILL ROAD, SUITE 303				3. Date of Earliest Transaction (Month/Day/Year) 08/26/2015					✓ Director			
(Street)  GREAT NE (City)	CK, NY 11021 (State)	4. If Amendment, Date Original Filed (Month/Day/Year)				6. Individual or Joint/Group Filing (Will be automatically set)  Form filed by One Reporting Person  Form filed by More than One Reporting Person							
			Table I	- Non-Derivativ	ve Securities A	cquired	, Disposed of,	or Beneficially (	Owned				
H o 1	,			2A. Deemed Execution Date, if	1 1					5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect Beneficial Ownership	
d i n g				any (Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	(D) or Indirect (I) (Instr. 4)	(Instr. 4)	
V	Shares of Beneficial Interest									289,043 (1)	D		

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16

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\$6.93

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

H o 1 d	1. Title of Derivative Security (Instr. 3)	or Exercise Price of	Date (Month/Day/Year)	Execution Date, if any	(Instr. 8)		5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security	Derivative Security	Derivative Securities	Ownership Form of	Ownership Form of	11. Nature of Indirect Beneficial
n g		Derivative Security		(Month/Day/Year)	Code	V	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Date Exercisable	Expiration Date		Amount or Number of Shares	(Instr. 5)	Owned Following Reported Transaction(s)	Security: Direct (D) or Indirect	Ownership (Instr. 4)		

#### **Explanation of Responses:**

- 1. Includes shares held in reporting person's IRA and Keogh accounts and in money purchase pension plan.
- 2. These shares are owned by children of reporting person who reside with reporting person. Reporting person disclaims any beneficial interest in these shares.
- 3. Reporting person is a trustee of the Gould Family Trust, which owns these shares.
- 4. Reporting person is a trustee of the Gould Shenfeld Family Foundation.
- 5. Shares are held by reporting person as custodian for his children. Reporting person disclaims beneficial ownership in these shares.
- 6. These shares are owned by Gould Investors L.P. Reporting person is chairman of the corporate managing general partner of Gould Investors L.P., and he holds limited partnership interests in Gould Investors L.P. These shares represent all shares of issuer owned by Gould Investors L.P.

#### Remarks:

Matthew J. Gould	08/28/2015
**Signature of Reporting Person	Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed.

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.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4(b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).