LAPIDUS SIDNEY

Form 4 October 02, 2012

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

3235-0287 Number: January 31, Expires:

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if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

09/28/2012

Stock (1)

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(b).

(Print or Type Responses)

1. Name and LAPIDUS	Address of Reporting I SIDNEY	Symbol	2. Issuer Name and Ticker or Trading Symbol KNOLL INC [KNL]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(First) (NBURG PINCUS & LEXINGTON AVE	(Month/D 09/28/20	3. Date of Earliest Transaction (Month/Day/Year) 09/28/2012				_X_ Director Officer (give below)	10%	Owner er (specify	
NEW YOR	(Street) RK, NY 10017 (State)	Filed(Mon	ndment, Da)		ities A <i>c</i> aa	6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M Person uired, Disposed of	One Reporting Per More than One Re	rson porting	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transactic Code (Instr. 8)	4. Securit	ties Ad	equired 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)		
Common	00/00/0010			006		\$	151205	D (2)		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

154,295

13.95

 $D^{(2)}$

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

896

A

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1.	Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	le and	8. Price of	9. Nu
D	erivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	ınt of	Derivative	Deriv
S	ecurity	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(I	nstr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
		Derivative				Securities	3		(Instr.	3 and 4)		Owne
		Security				Acquired						Follo
		•				(A) or						Repo
						Disposed						Trans
						of (D)						(Instr
						(Instr. 3,						`
						4, and 5)						
						, ,						
										Amount		
							Date	Expiration		or		
								Date	Title Numbe of	Number		
								Duic		of		
					Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
. 9	Director	10% Owner	Officer	Other			
LAPIDUS SIDNEY C/O WARBURG PINCUS & CO. 450 LEXINGTON AVENUE NEW YORK, NY 10017	X						

Signatures

/s/Michael A. Pollner, Attorney in Fact 10/02/2012

**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).
- This stock was acquired pursuant to the Company's Non-Employee Director Compensation Plan in a transaction exempt from Section 16 under Rule 16b-3(d). Under this Plan, directors may elect in advance to receive shares of common stock in lieu of all or a portion of their cash retainer at a price per share equal to the closing price of the common stock on the last business day of the quarter (referred to as the "transaction date"). The price as shown above reflects the last sale price of the common stock on the transaction date.
- (2) The amount of reporting person's beneficially owned securities includes 61,369 shares indirectly held in a grantor retained annuity trust, of which reporting person serves as trustee.

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.

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