#### CCA INDUSTRIES INC Form 3 October 06, 2015 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL Washington, D.C. 20549 OMB

### **INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> COOLEY PHILIP L			Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol CCA INDUSTRIES INC [CAW]					
(Last) (Fin	, , , , , , , , , , , , , , , , , , ,	Middle)	10/02/2015	4. Relationshi Person(s) to Is	p of Reporting suer	5. If Amendment, Date Original Filed(Month/Day/Year)			
(Street)				(Check all applicable) <u>X</u> Director Officer (give title below) (specify below)		Owner 6. Individual or Joint/Group ow) Filing(Check Applicable Line) _X_ Form filed by One Reporting			
						Person Form filed by More than One Reporting Person			
(City) (Sta	ate)	(Zip)	Table I - I	Non-Derivative Securities Beneficially Owned					
1.Title of Security (Instr. 4)			2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Reminder: Report on owned directly or ind	lirectly. Persons	who resp	ch class of securities benefic bond to the collection of	. 31	EC 1473 (7-02)	))			
information contained in this form are not required to respond unless the form displays a currently valid OMB control number. Table II - Derivative Securities Beneficially Owned ( <i>e.g.</i> , puts, calls, warrants, options, convertible securities)									

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of		Security: Direct (D)	

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

Shares

or Indirect (I) (Instr. 5)

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships					
	Director	10% Owner	Officer	Other			
COOLEY PHILIP L C/O BIGLARI HOLDINO 17802 IH 10 WEST, SUIT SAN ANTONIO, TX <sup>^</sup>	ÂX	Â	Â	Â			
Signatures							
/s/ Cooley, Philip L.	10/06/2	015					
**Signature of Reporting Person	Date						
Evaluation of Responses:							

## Explanation of Responses:

### No securities are beneficially owned

\* If the form is filed by more than one reporting person, see Instruction 5(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.