MCNAMARA GERALDINE M

Form 4 October 07, 2004

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: 2005

0.5

Estimated average burden hours per

response...

5. Relationship of Reporting Person(s) to

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

obligations

Check this box

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

2. Issuer Name and Ticker or Trading

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

09/07/2004

Income Fund Inc

| MCNAMA | E M Symbol DTF T | Symbol DTF TAX-FREE INCOME INC [DTF] | | | | Issuer (Check all applicable) | | | |
|--------------------------------------|---|--------------------------------------|--|---|----------|-------------------------------|--|--|---|
| (Last) 150 EAST | (First) 44TH ST, APT 3 | (Month) | of Earliest (Day/Year) 2004 | Γransaction | | _ | _X Director Officer (give to pelow) | | Owner r (specify |
| | (Street) | 4. If An | nendment, I | Oate Origina | ıl | (| 6. Individual or Joi | nt/Group Filin | g(Check |
| | RK, NY 10017 | | onth/Day/Ye | ar) | | - | Applicable Line) _X_ Form filed by Or Form filed by Mo Person | | |
| (City) | (State) | (Zip) Tal | ble I - Non- | Derivative | Securi | ties Acqui | ired, Disposed of, | or Beneficiall | y Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | 3. Transactic Code (Instr. 8) | 4. Securiti onor Disposo (Instr. 3, 4) Amount | ed of (E |)) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Tax-Free | 00/07/2004 | 00/07/2004 | D | 1 0801 | ۸ | \$ | 302 0006 | D | |

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

P

09/07/2004

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.

392.9096

D

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

1.9891 A

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| 1. Title of | 2. | 3. Transaction Date | | 4. | 5. | 6. Date Exerc | | 7. Titl | | 8. Price of | 9. Nu |
|--------------------------------------|---|---------------------|---|---------------------------------|--|---------------------|--------------------|------------------------------------|--|--------------------------------------|---|
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transacti Code (Instr. 8) | ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | Amou Under Securi (Instr. | rlying | Derivative Security (Instr. 5) | Deriv Secur Bene Own Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| MCNAMARA GERALDINE M 150 EAST 44TH ST APT 35G NEW YORK, NY 10017 | X | | | | | |

Signatures

Jack Benintende as POA for Geraldine
McNamara

10/07/2004

**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.

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