Ruckman Craig Form 3 December 13, 2017 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005 **SECURITIES** Estimated average burden hours per Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response... 0.5

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> Ruckman Craig | | 2. Date of Event Requir Statement (Month/Day/Year) | | 3. Issuer Name and Ticker or Trading Symbol AllianzGI Convertible & Income Fund [NCV] | | | | | |
|--|------------------------------------|---|--|--|---|---|--|--|--|
| (Last) (First) | (Middle) | 12/12/2017 | | 4. Relationship of Reporting Person(s) to Issuer | | endment, Date Original nth/Day/Year) | | | |
| 1633 BROADWAY | ζ | | | | , | • | | | |
| (Street) NEW YORK, NY 10019 | | | (Check | (Check all applicable) <u></u> Director <u></u> 10% Owner <u></u> Officer <u></u> Other (give title below) (specify below) Assistant Secretary | | 6. Individual or Joint/Group | | | |
| | | | X Officer (give title below | | | Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) (State) | (Zip) | Table I | ble I - Non-Derivative Securities Beneficially Owned | | | | | | |
| 1.Title of Security (Instr. 4) | | | nnt of Securities ally Owned) | Ownership | 4. Nature of Ind Ownership (Instr. 5) | irect Beneficial | | | |
| Reminder: Report on a source of the second directly or indirectly or ind | | ach class of securities ben | neficially SI | EC 1473 (7-02) | | | | | |
| in re | formation conta quired to respo | pond to the collectior ained in this form are ond unless the form d MB control number. | not | | | | | | |
| Table II - | Derivative Secu | rities Beneficially Owne | ed (e.g., puts, calls, | warrants, opti | ons, convertible | e securities) | | | |
| 1. Title of Derivative Se (Instr. 4) | Expi | ration Date Sec //Day/Year) Der | Fitle and Amount of curities Underlying rivative Security str. 4) | 4. Conversio or Exercis Price of | 1 | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |

Date

Exercisable

Expiration

Title

Date

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | |
|--|------------|---------------|-----------|---------------------|-------|--|--|
| | | Director | 10% Owner | Officer | Other | | |
| Ruckman Craig 1633 BROADWAY NEW YORK, NY 10019 | | Â | Â | Assistant Secretary | Â | | |
| Signatures | | | | | | | |
| /s/ Craig Ruckman | 12/13/2017 | | | | | | |
| <u>**</u> Signature of Reporting Person | | Date | | | | | |

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).

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Remarks:

Exhibit List: Exhibit 24, Power of Attorney No securities are beneficially owned.

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.