## Edgar Filing: DNP SELECT INCOME FUND INC - Form 4

Eugal Filling. DINF SELECT INCOME FOND INC - FOITH 4											
DNP SELEC Form 4 May 13, 201	CT INCOME FUND INC										
FORM	-	OMB APPROVAL									
	UNITEDSTATE		SECURITIES AND EXCHANGE C Washington, D.C. 20549				N OMB Number:	3235-0287			
Check th if no long subject to Section 1 Form 4 c	ger 5 <b>STATEMENT (</b> 6. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHII SECURITIES					Estimated burden ho response	ours per			
Form 5 obligations may continue. See Instruction 1(b). 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 A BANK OF A	Symbol	-				5. Relationship of Reporting Person(s) to Issuer					
		DNP SELECT [DNP]	DNP SELECT INCOME FUND INC [DNP]				(Check all applicable)				
(Last) BANK OF CORPORA TRYON ST	3. Date of Earliest (Month/Day/Year) 04/15/2011	-					0% Owner ther (specify				
		endment, Date Original			6. Individual or Joint/Group Filing(Check						
Filed(Month/Day/Year) CHARLOTTE, NC 28255						Applicable Line) Form filed by One Reporting Person _X_ Form filed by More than One Reporting Person					
(City)	(State) (Zip)	Table I - Non	-Derivative	Secur	rities Ac	quired, Disposed	of, or Benefici	ally Owned			
1.Title of Security (Instr. 3)	any	on Date, if Transac Code	Date, if Transaction(A) or Disposed of Code (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Stock	04/15/2011	Code P	V Amount 1,500		Price \$ 9.62	(Instr. 3 and 4) 1,500	Ι	By Subsidiary			
Common Stock	04/15/2011	S	1,500	D	\$ 9.57	0	Ι	By Subsidiary			

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

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.

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

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address		Relations				
		10% Owner	Officer	Other		
BANK OF AMERICA CORP /DE/ BANK OF AMERICA CORPORATE CENTER 100 N. TRYON STREET CHARLOTTE, NC 28255		Х				
MERRILL LYNCH, PIERCE, FENNER & SMITH INC. 4 WORLD FINANCIAL CENTER NORTH TOWER X NEW YORK, NY 10080						
Signatures						
Bank of America Corporation, By: /s/ Beth Dorfman, Authorized Signatory						
**Signature of Reporting Person						
Merrill Lynch, Pierce, Fenner & Smith Incorporated, By: /s/ Lawrence Emerson, Title: Attorney-In-Fact						
**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).

#### **Remarks:**

The transactions reported on this Form 4 were effected by Merrill Lynch, Pierce, Fenner & Smith Incorporated, an indirect, wh

Disgorgement of profits, if applicable, based on transactions reported above is being made by the Reporting Persons to the Issue

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.

#### **Reporting Owners**