Ares Dynamic Credit Allocation Fund, Inc. Form 4 December 19, 2016

December 19, 1	2016									
FORM	Δ							OMB AF	PROVAL	
Washington, D.C. 20549								OMB Number:	3235-0287	
Check this l if no longer								Expires:	January 31,	
subject to Section 16. Form 4 or	SIAIEM	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP SECURITIES						Extimated average burden hours per response 0.5		
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 Res	sponses)									
1. Name and Address of Reporting Person <u>*</u> Shaw John Joseph							5. Relationship of Reporting Person(s) to Issuer			
	Ares Dynamic Credit Allocation Fund, Inc. [ARDC]				on	(Check all applicable)				
(Last)	(First) (M	(First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)				-	X_ Director10% Owner Officer (give titleOther (specify below) below)			
2000 AVENUE OF THE 12/16/2016 STARS,, 12TH FLOOR					L	leiow)	below)			
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				A	6. Individual or Joint/Group Filing(Check Applicable Line)				
LOS ANGELES, CA 90067					-	_X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-	Derivative	Secu	rities Acqui	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			ate, if Transaction Code	if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) ar) (Instr. 8) (A)			 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)	
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		By the	
Common 12 Stock 12	2/16/2016		Р	10,000	A	\$ 14.9789 (1)	10,000	Ι	John Shaw Living Trust <u>(2)</u>	

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

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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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Unde Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne 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			
Shaw John Joseph 2000 AVENUE OF THE STARS, 12TH FLOOR LOS ANGELES, CA 90067	Х						
Signatures							
/s/ Brett Byrd, as attorney-in-fact for John J. Shaw			12/19/20	16			
**Signature of Reporting Person			Date				
Evalenction of Door		- -					

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).

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The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$14.9766 to \$14.98, inclusive. The Reporting Person undertakes to provide to Ares Dynamic Credit Allocation Fund, Inc., any security holder of Ares Dynamic Credit Allocation Fund, Inc., or the staff of the Securities and Exchange Commission, upon request, full

- information regarding the number of shares purchased at each separate price within the range set forth in footnote (1) to this Form 4.
- (2) The shares are held by the John Shaw Living Trust, of which the reporting person is a beneficiary.

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.