Edgar Filing: Shaw John Joseph - Form 4

Shaw John Joseph Form 4 September 28, 2018 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES MB 2005 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 1(b). State average 2005 (print or Type Response) (print or Type Response) State average												
1. Name and Address of Reporting Person <u>*</u> Shaw John Joseph			21 Isouer Flame and Frener of Frading					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	(First) (NUE OF THE 2TH FLOOR	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 09/26/2018					_X_Director10% Owner Officer (give titleOther (specify below)below)				
LOGANO	(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)						 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
	ELES, CA 90067							Person	·			
(City)	(State)	(Zip)	Tal	ole I - Non-	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		n Date, if	3. Transactic Code (Instr. 8) Code V	omr Dispos (Instr. 3, 4	ed of		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)		
Common Stock	09/26/2018			Р	20,000	A	\$ 15.5563 (1)	31,461 <u>(2)</u>	Ι	By the John Shaw Living Trust (3)		

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	unt 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	X						
Signatures							
/s/ Brett Byrd, as attorney-in-fact for Shaw	r John J.	(09/28/20	18			
**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).

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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 \$15.5195 to \$15.57, 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) Includes shares acquired under the Dividend Reinvestment Plan of Ares Dynamic Credit Allocation Fund, Inc.
- (3) 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.