ALLIANCE Form 4 November 1	CALIFORNIA N 0. 2014	MUNICIP	PAL INC	OME FU	ND						
									OMB	APPROVAL	
			SECURITIES AND EXCHANGE (Washington, D.C. 20549					COMMISSIO	N OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 o	r STATEMENT OF CHA			NGES IN BENEFICIAL OWN SECURITIES				NERSHIP OF	Estimated burden ho	Expires: January 31, 2005 Estimated 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										0.0	
(Print or Type I	Responses)										
CITIGROUP INC Symbol ALL MUN			Symbol ALLIA	LIANCE CALIFORNIA				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			MUNIC [AKP]	CIPAL IN	COME	FUNI)				
(Last)	(First) (1	Middle)	3 Date of Earliest Transaction					Director Officer (giv below)	Officer (give title Other (specify		
399 PARK AVENUE			11/07/2014								
				ndment, Da hth/Day/Year		1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW YOR	K, NY 10022								More than One		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Ac	quired, Disposed	of, or Benefici	ally Owned	
1.Title of Security (Instr. 3)		. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year		3.4. Securities AcquiredTransaction(A) or Disposed ofCode(D)(Instr. 8)(Instr. 3, 4 and 5)(A)				SecuritiesOBeneficiallyFOwned(()FollowingI	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Auction Rate	11/07/2014			Code V	Amount	or (D) D	Price \$	(Instr. 3 and 4) 856	I	By Subsidiary	
Preferred	11/07/2014			3	000	D	83.5	050	1	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.

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

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

1. Title of 2 3. Transaction Date 3A. Deemed 5. 7. Title and 8. Price of 4. 6. Date Exercisable and 9. Nt Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date Amount of Derivative Deriv Security or Exercise any Code of (Month/Day/Year) Underlying Security Secu (Month/Day/Year) (Instr. 8) (Instr. 5) (Instr. 3) Price of Derivative Securities Bene Derivative Securities (Instr. 3 and 4) Own Security Acquired Follo (A) or Repo Disposed Trans of (D) (Insti (Instr. 3, 4, and 5) Amount or Date Expiration Title Number Exercisable Date of Code V (A) (D) Shares

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Reporting Owners

Reporting Owner Name / Address		Relationsh					
	Director	10% Owner	Officer	Other			
CITIGROUP INC 399 PARK AVENUE NEW YORK, NY 10022		Х					
Signatures							
Citigroup Inc., By: /s/ Ali L. K Secretary		11/10/2014					
**Signature of Reporting		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).

The Auction Rate Preferred Shares ("Shares") reported in Table I represent Shares beneficially owned by Citigroup Global Markets Inc.

(1) ("CGMI"). Citigroup Financial Products Inc. ("CFP") is the sole stockholder of CGMI. Citigroup Global Markets Holdings Inc. ("CGMH") is the sole stockholder of CFP. Citigroup Inc. is the sole stockholder of CGMH.

Remarks:

These Shares represent the Reporting Person's combined holdings in multiple series of auction rate preferred securities of the i

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.