Edgar Filing: CONDON PHILIP G - Form 4

Form 4	AILIP G										
March 03, 20	09										
FORM	4 INITED		CECUD	TTEC A		TT A 1	NCE	COMMERION	-	PROVAL	
	UNITED	SIAIES		hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this if no long subject to Section 16 Form 4 or	^r STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							burden hou	Estimated average burden hours per		
Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed pu s Section 17	(a) of the		ility Hold	ing Com	ipany	Act of	e Act of 1934, f 1935 or Sectio 40	response	0.5	
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> CONDON PHILIP G			2. Issuer Name and Ticker or Trading Symbol DWS MUNICIPAL INCOME				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			TRUST	[KTF]					11	·	
(Last) C/O ANJIE I DEUTSCHE AVE	3. Date of Earliest Transaction (Month/Day/Year)03/02/2009					Director 10% Owner X Officer (give title Other (specify below) Dother (specify below) Portfolio Manager					
	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 					
NEW YORK	K, NY 10017							Form filed by M Person	More than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative	Securi	ties Acc	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	c) Execution any		3. Transactio Code (Instr. 8) Code V	on(A) or Di (D) (Instr. 3,	ispose	d 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)		
Common Stock	03/02/2009			Р	2,000	A	\$ 9.27	59,700	D		

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Under Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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			
CONDON PHILIP G C/O ANJIE LAROCCA, DEUTSCHE BANK 280 PARK AVE NEW YORK, NY 10017				Portfolio Manager				
Signatures								
Philip G. Condon	03/03/2009							
**Signature of	Date							

<u>**</u>Signature of Reporting Person

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).

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.