Edgar Filing: WELLS FARGO ADVANTAGE INCOME OPPORTUNITIES FUND - Form 5

WELLS FARGO ADVANTAGE INCOME OPPORTUNITIES FUND

Form 5 May 04, 2015

OMB APPROVAL FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer Shiver Mai S Symbol WELLS FARGO ADVANTAGE (Check all applicable) INCOME OPPORTUNITIES FUND [EAD] Director 10% Owner Officer (give title _X_ Other (specify (Middle) (Last) (First) 3. Statement for Issuer's Fiscal Year Ended below) below) (Month/Day/Year) Fmr CCO of Sub-Adviser 04/30/2015 **WELLS CAPITAL** MANAGEMENT, Â 525 MARKET STREET, 10TH FLOOR (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) SAN FRANCISCO, Â CAÂ 94105 _X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of 2. Transaction Date 2A. Deemed 4. Securities 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction Acquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Beneficial (Instr. 3, 4 and 5) Owned at end Ownership (Month/Day/Year) (Instr. 8) Indirect (I) of Issuer's (Instr. 4) (Instr. 4) (A) Fiscal Year (Instr. 3 and 4) Amount (D) Price Reminder: Report on a separate line for each class of Persons who respond to the collection of information **SEC 2270**

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

securities beneficially owned directly or indirectly.

contained in this form are not required to respond unless

the form displays a currently valid OMB control number.

(9-02)

Edgar Filing: WELLS FARGO ADVANTAGE INCOME OPPORTUNITIES FUND - Form 5

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired			`		
	Ĭ				(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
					, ,					
									Amount	
						Date	Expiration		or	
							Date	Title	Number	
							Dute		of	
					(A) (D)				Shares	

D

Reporting Owners

Reporting Owner Name / Address	Relationships					
Treporting of the state of the state of	Director	10% Owner	Officer	Other		
Shiver Mai S						
WELLS CAPITAL MANAGEMENT	â	â	â	Fmr CCO of Sub-Adviser		
525 MARKET STREET, 10TH FLOOR	А	A	А	Filli CCO of Sub-Adviser		
SAN FRANCISCO, CA 94105						

Signatures

/s/ Catherine F. Kennedy by power of 05/04/2015 attorney Date

**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).

Â

Remarks:

Ms. Shiver is no longer the CCO of Wells Capital Management Incorporated, the Fund's sub-adviser.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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 2