Edgar Filing: OKEEFFE JANE D - Form 4

OKEEFFE JA	ANE D												
Form 4 January 15, 2	013												
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287			
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Form 4 or				GES II SECU			CIA	L OWN	ERSHIP OF	Estimated a burden hou response			
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section 17(a	a) of the		ility Ho	oldi	ing Com	pany	Act of	Act of 1934, 1935 or Sectior)	1			
(Print or Type R	esponses)												
OKEEFFE JANE D Symbol				uer Name and Ticker or Trading ol SWORTH FUND LTD [ECF]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (N	(liddle)		3. Date of Earliest Transaction							ck all applicable)		
				Day/Year)					X Director 10% Owner X Officer (give titleX Other (specify below) below) President / Director of Investment Adviser				
				ndment, Date Original th/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 				
(City)		(Zip)		T NT	D	• .• .			Person	D (* • 1			
		-			ŀ-D€			_	ired, Disposed of,		-		
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)	Executi any	on Date, if	1			d of (D)	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	(D)	Price	(Instr. 3 and 4)				
Shares of Beneficial Interest	09/26/2008			Р		100	А	\$ 5.977	11,766.05 <u>(1)</u> (2)	D <u>(3)</u>			
Shares of Beneficial Interest	09/26/2008			Р		1,000	A	\$ 6.05	12,766 <u>(1)</u>	D			
Shares of Beneficial Interest	09/26/2008			Р		900	Α	\$ 6.04	13,766 <u>(1)</u>	D			

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. 6. Date Exercisable and orNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired		ate	Amount of Der Underlying Sec		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo
				(A) or Disposed						Repo Trans
				of (D)						(Instr
				(Instr. 3, 4, and 5)						
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
here with a street reader and a street and		10% Owner	Officer	Other				
OKEEFFE JANE D C/O DINSMORE CAPITAL MANAGEMENT CO. 65 MADISON AVE MORRISTOWN, NJ 07960	Х		President	Director of Investment Adviser				
Signatures								
/s/ Gary I. Levine, attorney-in-fact 01/15/2013								

**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).
- (1) These share amounts have been corrected to exclude 1,832 shares indirectly owned by the reporting person, and which were inadvertently included in Column 5 of Table I of Ms. O'Keeffe's Form 4 filed on 9/26/2008
- (2) Includes 1,322 shares acquired on various dates in fiscal year 2008 under the ECF dividend reinvestment plan.

In addition, the reporting person is the indirect beneficial owner of 1,832 additional shares. These additional shares consist of: (i) 916
 (3) shares held by an UTMA trust for her daughter's benefit. Includes 118 shares acquired on various dates in fiscal year 2008 under the ECF dividend reinvestment plan, and (ii) 916 shares held by an UTMA trust for her son's benefit. Includes 118 shares acquired on various dates in fiscal year 2008 under the ECF dividend reinvestment plan.

Remarks:

Exhibit List: Exhibit 24 (Power of Attorney)

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.