Edgar Filing: GABBAY HENRY - Form 4

| GABBAY H Form 4 | ENRY | | | | | | | | | | |
|---|---|--|--------------------------------|---|--|-------|-------------|---|--|--|--|
| January 16, 2 | 2019 | | | | | | | | | | |
| FORM | FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | OMB AF | PROVAL | | |
| | UNIII | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | |
| Check thi if no long subject to Section 14 Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b). | er STAT 6. Filed ¹⁸ Section | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 | | | | | | | | January 31, 2005 Estimated average burden hours per response 0.5 | |
| (Print or Type R | (esponses) | | | | | | | | | | |
| GABBAY HENRY Symbol BLAC CAPI | | | Symbol BLACK | suer Name and Ticker or Trading ol CKROCK ENHANCED ITAL & INCOME FUND, INC. | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) 55 EAST 52 | (First) ND STREET | (Middle) | | - | insaction | | | X Director Officer (give below) | | Owner er (specify | |
| Filed(Mon | | | | endment, Date Original nth/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 | | | |
| NEW YORE | K, NY 10055 | | | | | | | Person | | | |
| (City) | (State) | (Zip) | Table | e I - Non-Do | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction (Month/Day/Yo | ear) Executio any | med n Date, if Day/Year) | 3. Transaction Code (Instr. 8) Code V | 4. Securit n(A) or Di (Instr. 3, - | spose | d of (D) | 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 | 01/15/2019 | | | Р | 10 | A | \$ 14.76 | 10 | 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Securi (Instr. | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|---|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|------------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| GABBAY HENRY 55 EAST 52ND STREET NEW YORK, NY 10055 | Х | | | | | |
| Signatures | | | | | | |
| /s/ Eugene Drozdetski as Attorney-in-Fact | | 01/16/2019 | | | | |
| **Signature of Reporting Person | Date | | | | | |
| Evenlaw attack of Da | | | | | | |

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.