Edgar Filing: TRI-CONTINENTAL CORP - Form 3

TRI-CONTINENTAL CORP Form 3 November 21, 2013 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL

INITIAL STATEMENT OF 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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| 1. Name and Address of Reporting Person <u>*</u> Faria Lee | | | 2. Date of Event Requiring Statement (Month/Day/Year) | | 3. Issuer Name and Ticker or Trading Symbol TRI-CONTINENTAL CORP [TY] | | | | | |
|--|-------------------|----------------------------|---|-----------------------------------|--|--|-----------|---|---|--|
| (Last) | (First) | (Middle) | 11/15/2013 | | 4. Relationship of Reporting Person(s) to Issuer | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | |
| 225 FRANKI | LIN STRE | ET | | | | | | | • | |
| | (Street) | | | | (Check all applicable) 6. Individual or Joint/C | | | | ual or Joint/Group | |
| BOSTON, MA 02110 | | | | | Director 10% Owner OfficerX Other (give title below) (specify below) CCO of Issuer's Inv. Adviser | | r ow) | Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | |
| (City) | (State) | (Zip) | Tab | ole I - N | Non-Derivative Securities Beneficially Owned | | | | | |
| 1.Title of Securi (Instr. 4) | ty | | Ben | mount of eficially (tr. 4) | Securities Owned | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | | ership | rect Beneficial | |
| Reminder: Report owned directly o | | te line for ea | ch class of securities | s benefici | ally SI | EC 1473 (7-02 |) | | | |
| · | inform require | ation conta ed to respo | oond to the collec ined in this form nd unless the for //B control numbe | are not m displa | ays a | | | | | |
| Ta | ble II - Deri | vative Secur | rities Beneficially O | wned (e. | g., puts, calls, | warrants, opt | tions, c | convertible | securities) | |
| 1. Title of Deriva (Instr. 4) | ative Security | Expir (Month/ | te Exercisable and ration Date Day/Year) | Securitie | and Amount of es Underlying ve Security) | 4. Conversio or Exerci Price of Derivativ | se F D | wnership orm of erivative ecurity: | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | |
| | | Date | Expiration | | | Constant | D | (D) | | |

Exercisable

Date

Title

Direct (D)

or Indirect

(Instr. 5)

(I)

Security

Amount or

Number of

Shares

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|------------------------------|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | |
| Faria Lee 225 FRANKLIN STREET BOSTON, MA 02110 | Â | Â | Â | CCO of Issuer's Inv. Adviser | | | |
| Signatures | | | | | | | |
| Joseph D'Alessandro, Power of Attorney | | 11/21/2 | 2013 | | | | |
| **Signature of Reporting Person | | Dat | e | | | | |

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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.