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EVERGREEN MANAGED INCOME FUND

Form 5

November 28, 2006

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 McCarthy Brian R Symbol **EVERGREEN MANAGED** (Check all applicable) INCOME FUND [ERC] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) Director 10% Owner _X_ Other (specify Officer (give title (Month/Day/Year) below) below) 10/31/2006 Former Dividend Committee* EVERGREEN INVESTMENTS. MA 2110, 200 BERKELEY **STREET** 4. If Amendment, Date Original (Street) 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) BOSTON, MAÂ 02116 _X_ Form Filed by One Reporting Person Form Filed by More than One Reporting (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 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 (D) or (Instr. 3) Disposed of (D) Beneficially Beneficial Code (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned at end Indirect (I) Ownership of Issuer's (Instr. 4) (Instr. 4) (A) Fiscal Year or (Instr. 3 and 4) Amount (D) Price Persons who respond to the collection of information SEC 2270 Reminder: Report on a separate line for each class of contained in this form are not required to respond unless securities beneficially owned directly or indirectly. (9-02)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 | 2. Conversion | 3. Transaction Date (Month/Day/Year) | | 4. Transaction | 5. Number | 6. Date Exerc Expiration Da | | 7. Title an Amount o | | 8. Price of Derivative | |
|------------------------|---------------|--------------------------------------|------------------|----------------|--------------|--------------------------------|------------|----------------------|-------|------------------------|--|
| Security | or Exercise | | any | Code | of | | | , , | | Security | |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | | | | | (Instr. 5) | |
| | Derivative | | | | Securities | | | | | | |
| | Security | | | | Acquired | | | | | | |
| | | | | | (A) or | | | | | | |
| | | | | | Disposed | | | | | | |
| | | | | | of (D) | | | | | | |
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | (A) (D) | Date | Expiration | Title Am | nount | | |
| | | | | | | Exercisable | Date | or | | | |
| | | | | | | | | Nu | ımber | | |
| | | | | | | | | of | | | |
| | | | | | | | | Sha | ares | | |

Relationships

D

Reporting Owners

| Reporting Owner Name / Address | | | | | | | |
|---|----------|-----------|---------|----------------------------|--|--|--|
| • 0 | Director | 10% Owner | Officer | Other | | | |
| McCarthy Brian R EVERGREEN INVESTMENTS, MA 2110 200 BERKELEY STREET BOSTON, MA 02116 | Â | Â | Â | Former Dividend Committee* | | | |

Signatures

Brian R. 11/28/2006 **McCarthy** **Signature of Date 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).

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Remarks:

*Member

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.

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