Apollo Tactical Income Fund Inc.

Form 4

December 09, 2014

December (J9, 2014											
FORM	11 4 HALLED		CECH	DITTEC	A NID EW	CITA	NOE CO			PPROVAL		
	UNITED	SIAIES		KITIES . Ishington			INGE CO	OMMISSION	OMB Number:	3235-0287		
Check t if no loa	nger								Expires:	January 31,		
subject Section Form 4	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average burden hours per response 0.5					
Form 5	Section 16(a) of the Securities Exchange					•						
obligations may continue. See Instruction 1(b). Section 17(a) of the Public Utility Holding Company Act of 1 30(h) of the Investment Company Act of 1940							1935 or Section	ı				
(Print or Type	Responses)											
Apollo Total Return Master Fund Syn			Symbol	er Name an]	5. Relationship of Reporting Person(s) to Issuer				
L.I .	Apollo Tactical Income Fund Inc. [AIF]					(Check all applicable)						
(Last) (First) (Middle)			3. Date of Earliest Transaction					Director 10% Owner Officer (give titleX Other (spec				
				Month/Day/Year)				elow)	er (specify			
C/O APOLLO TOTAL RETURN 12/05/ FUND ADVISORS LP, ONE				05/2014				See Remarks				
	TANVILLE ROA											
(Street) 4. If Am				nendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mo				onth/Day/Ye	ar)			Applicable Line) _X_ Form filed by One Reporting Person				
PURCHAS	SE, NY 10577						-	Form filed by M Form filed by M Person				
(City)	(State)	(State) Table I - Non-Derivative Securities Acquired, Disposed of							or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired (A. Transactiom Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Apollo Tactical Income Fund	12/05/2014			S	11,300	, ,	\$ 16.6436	88,700	D			
Common Stock							20.0100					
Apollo Tactical Income Fund	12/08/2014			S	38,700	D	\$ 16.5772	50,000	D			

Common Stock

Apollo Tactical

Income Fund S 33,000 D \$ 17,000 D

Common Stock

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.

SEC 1474

(9-02)

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

	1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transacti	5. orNumber	6. Date Exerc Expiration D		7. Title Amou		8. Price of Derivative	9. Nu Deriv
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ities	(Instr. 5)	Bene
		Derivative				Securities	;		(Instr.	3 and 4)		Own
		Security				Acquired						Follo
						(A) or						Repo
						Disposed						Trans
						of (D)						(Instr
						(Instr. 3,						
						4, and 5)						
										Amount		
										or		
						Date	Expiration		Number			
						Exercisable	Date	11110	of			
				Code V	(A) (D)				Shares			

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Apollo Total Return Master Fund L.P. C/O APOLLO TOTAL RETURN FUND ADVISORS LP ONE MANHATTANVILLE ROAD PURCHASE, NY 10577

See Remarks

Signatures

/s/ Joseph D. 12/09/2014 Glatt

**Signature of Date
Reporting Person

Reporting Owners 2

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).

Remarks:

Filed pursuant to Section 30(h) of the Investment Company Act of 1940. The reporting party may be deemed to be an affiliate 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.