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ALLIANCEBERNSTEIN NATIONAL MUNICIPAL INCOME FUND

Form 3

February 10, 2009

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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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 * UBS AG	2. Date of Event Requiring Statement (Month/Day/Year) 01/31/2009	3. Issuer Name and Ticker or Trading Symbol ALLIANCEBERNSTEIN NATIONAL MUNICIPAL INCOME FUND [AFB]					
(Last) (First) (Middle)	01/31/2009	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
BAHNHOFSTRASSE 45, PO BOX CH-8021		(Check all applicable)			Thed(worth)		
(Street)		Director Officer (give title below	X 10% (6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting		
ZURICH, V8Â		(give title below	(specify belo	w)	Person Form filed by More than One Reporting Person		
(City) (State) (Zip)	Table I - N	on-Derivative Securities Beneficially Owned					
1.Title of Security (Instr. 4)	2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owner (Instr.	*		
Auction Preferred Stock (3)	1,004 (2)		I	By su	ubsidiary - see footnote $\frac{(1)}{}$		
Reminder: Report on a separate line for each owned directly or indirectly.	ach class of securities benefic	ially SI	EC 1473 (7-02))			

 $Table\ II\ -\ Derivative\ Securities\ Beneficially\ Owned\ (\textit{e.g.}, puts, calls, warrants, options, convertible\ securities)$

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currently valid OMB control number.

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Title	Derivative	Security:	

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Date Expiration
Exercisable Date

Amount or Security
Number of
Shares

Direct (D) or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

UBS AG

BAHNHOFSTRASSE 45 PO BOX CH-8021 ZURICH, V8Â

 $\hat{A} \qquad \quad \hat{A} \quad X \quad \quad \hat{A} \qquad \quad \hat{A}$

Signatures

/s/ Anthony DeFilippis 02/10/2009

**Signature of Date
Reporting Person

/s/ Joseph Gallichio 02/10/2009

**Signature of Date
Reporting Person

Explanation of Responses:

- * 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).
- This Statement is filed by UBS AG for the benefit and on behalf of UBS Securities LLC and UBS Financial Services Inc., two-wholly owned subsidiaries of UBS AG to which UBS AG has delegated portions of its performance obligations with respect to the Auction Rate Securities Rights issued by UBS AG to certain clients and pursuant to which the securities reported herein have been purchased from such clients.
- Pursuant to the Global Relief Letter referred to below, this filing reports holdings of the Series of Auction Preferred Stock identified in Item 1 of this Table I on an aggregated basis.
- (3) (CUSIP No[s]. 01864V203, 01864V302, 01864V401, 01864V500)

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Remarks:

The Shares reported herein represent UBS AG's combined holdings in multiple series of auction pref are treated herein as one class of securities in accordance with the Auction Rate Securities -- Glot Relief Letter") issued by the staff of the Securities and Exchange Commission (SEC) on September undertakes to provide, upon request by the SEC staff, the issuer, or a security holder of the issue the number of securities identified in Table I purchased and sold at each different price and date on which beneficial ownership exceeded ten percent and January 31, 2009, as required by the Glob

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.

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