

Hoagland Eleanor T.M.  
Form 3  
October 11, 2012

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2015  
Estimated average burden hours per response... 0.5

**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)

<p>1. Name and Address of Reporting Person *</p> <p>Â Hoagland Eleanor T.M.</p> <p>(Last) (First) (Middle)</p> <p>C/O ALPINE WOODS CAPITAL INVESTORS,Â 2500 WESTCHESTER AVENUE, SUITE 215</p> <p>(Street)</p> <p>PURCHASE,Â NYÂ 10577</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement (Month/Day/Year)</p> <p>10/03/2012</p>	<p>3. Issuer Name <b>and</b> Ticker or Trading Symbol</p> <p>ALPINE GLOBAL PREMIER PROPERTIES FUND [AWP]</p> <p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below)</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p> <p>6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person</p>
---	--	--	--

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Shares of Beneficial Ownership	0	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	---------------------------	----------------------	--

Edgar Filing: Hoagland Eleanor T.M. - Form 3

		(Instr. 4)				
Date	Expiration	Title	Amount or	Price of	Derivative	Derivative
Exercisable	Date		Number of	Derivative	Security:	Security:
			Shares	Security	Direct (D)	Direct (D)
					or Indirect	or Indirect
					(I)	(I)
						(Instr. 5)

**Reporting Owners**

**Reporting Owner Name / Address**

**Relationships**

Director	10% Owner	Officer	Other
----------	-----------	---------	-------

Hoagland Eleanor T.M.  
C/O ALPINE WOODS CAPITAL INVESTORS  
2500 WESTCHESTER AVENUE, SUITE 215  
PURCHASE, NY 10577

Â X      Â      Â      Â

**Signatures**

/s/ Eleanor T.M.      10/03/2012  
Hoagland

Signature of Reporting Person      Date

**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).

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.