DoubleLine Income Solutions Fund Form 4 September 09, 2014

September 07	, 2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
Washington, D.C. 20549							OMB Number:	3235-0287			
Check this if no longe	vr.								Expires:	January 31, 2005	
subject to Section 16 Form 4 or	SIAIEM	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								verage 's per 0.5	
Form 4 or Form 5 obligations may continue.response0.5See Instruction 1(b).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 19400.5											
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person <sup>*</sup> Sherman Jeffrey J.			2. Issuer Name <b>and</b> Ticker or Trading Symbol DoubleLine Income Solutions Fund [DSL]				0	5. Relationship of Reporting Person(s) to Issuer			
							rund	(Check all applicable)			
			3. Date of Earliest Transaction (Month/Day/Year)					Director 10% Owner Officer (give title Other (specify			
333 SOUTH GRAND AVENUE,09/09/2014below)below)18TH FLOORVice President											
				-				6. Individual or Joint/Group Filing(Check Applicable Line)			
LOS ANGELES, CA 90071						_X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State) (	Zip)	Table	I - Non-De	erivative S	Securi	ties Acqu	iired, Disposed of,	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date any (Month/Day/Y		on Date, if	Code (Instr. 3, 4 and 5)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Doubleline				Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(1154. 7)		
Income Solutions	09/09/2014	09/09/	2014	Р	1,000	А	\$ 21.679	1,000	D		

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.

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

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## Edgar Filing: DoubleLine Income Solutions Fund - Form 4

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
reporting of the runter runters	Director	10% Owner	Officer	Other		
Sherman Jeffrey J. 333 SOUTH GRAND AVENUE, 18TH FLOOR LOS ANGELES, CA 90071			Vice President			

## Signatures

/s/ Jeffrey 09/09/2014 Sherman

\*\*Signature of Reporting Person

Date

## **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).

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.