UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Cogan Sarah E

January 02, 2019

FORM 3

Form 3

(Instr. 4)

	I J	Washington, D.C. 20549						3235-0104	
	Fi	led pursuan ion 17(a) of		s Exchange Act of 1934, any Act of 1935 or Sectio		Expires: January 20 Estimated average burden hours per response n			
(Print or Type F	Responses)								
1. Name and Address of Reporting Person <u>*</u> Cogan Sarah E			2. Date of Event Requiring Statement (Month/Day/Year) 01/01/2019	PIMCO Dynamic Credit & Mortga			age Income Fund [PCI]		
(Last) C/O PIMCC CENTER D		(Middle)	4. Relationship of Reporting 5. If			Filed	Amendment, Date Original d(Month/Day/Year)		
NEWPORT BEACH, ((Street) CAÂ 9266	50		X Directo Officer (give title belo	Other	Filing (a) (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	ividual or Joir (Check Applica orm filed by On orm filed by Mo ting Person	able Line) ne Reporting	
(City)	(State)	(Zip)	Table I -	Non-Deriva	tive Securiti	ies Beneficially Owned			
1.Title of Secu (Instr. 4)	rity		2. Amount Beneficial (Instr. 4)	t of Securities ly Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Ownership (Instr. 5)	Indirect Bene	ficial	
Reminder: Rep owned directly			ach class of securities benef	ficially	SEC 1473 (7-02	.)			
	infor requ	mation cont	spond to the collection of ained in this form are n and unless the form dis MB control number.	ot					
Т	able II - De	erivative Secu	rities Beneficially Owned	(e.g., puts, calls	s, warrants, op	tions, convert	ible securities	s)	

OMB APPROVAL

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	r Other				
Cogan Sarah E C/O PIMCO 650 NEWPORT CENTER DRIVE NEWPORT BEACH, CA 92660	ÂX	Â	Â	Â				
Signatures								
/s/ Kevin Van Gorder, Attorney-in-Fa Cogan	(01/02/2019						
<u>**</u> Signature of Reporting Perso		Date						
Explanation of Responses:								
No securities are beneficially owned								

* 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).

Â

Remarks:

Exhibit List: Exhibit 24 - Power of Attorney

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.