

## PIMCO NEW YORK MUNICIPAL INCOME FUND

Form 3

May 09, 2007

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

OMB APPROVAL

OMB  
Number: 3235-0104Expires: January 31,  
2005Estimated 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)

|                                           |         |                                      |                                                                                                                                                          |
|-------------------------------------------|---------|--------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Name and Address of Reporting Person * |         | 2. Date of Event Requiring Statement | 3. Issuer Name <b>and</b> Ticker or Trading Symbol                                                                                                       |
| Â ALLIANZ GLOBAL INVESTORS OF AMERICA L P |         | (Month/Day/Year)<br>05/09/2007       | PIMCO NEW YORK MUNICIPAL INCOME FUND<br>[PNF]                                                                                                            |
| (Last)                                    | (First) | (Middle)                             |                                                                                                                                                          |
| 800 NEWPORT CENTER<br>DR,Â SUITE 600      |         |                                      | 4. Relationship of Reporting Person(s) to Issuer                                                                                                         |
| (Street)                                  |         |                                      | (Check all applicable)                                                                                                                                   |
| NEWPORT<br>BEACH,Â CAÂ 92600              |         |                                      | 5. If Amendment, Date Original Filed(Month/Day/Year)                                                                                                     |
| (City)                                    | (State) | (Zip)                                |                                                                                                                                                          |
|                                           |         |                                      | 6. Individual or Joint/Group Filing(Check Applicable Line)<br>_X_ Form filed by One Reporting Person<br>___ Form filed by More than One Reporting Person |

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

|                                    |                                                          |                                                                   |                                                          |
|------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------|
| 1. Title of Security<br>(Instr. 4) | 2. Amount of Securities Beneficially Owned<br>(Instr. 4) | 3. Ownership Form:<br>Direct (D)<br>or Indirect (I)<br>(Instr. 5) | 4. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------|

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<br>(Instr. 4) | 2. Date Exercisable and Expiration Date<br>(Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security<br>(Instr. 4) | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security:<br>Direct (D) | 6. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|                                               | Date Exercisable                                            | Expiration Date                                                                | Title                                                  | Amount or Number of                                     |                                                          |

Shares

or Indirect  
(I)  
(Instr. 5)

## Reporting Owners

| Reporting Owner Name / Address                                                                           | Relationships |           |         |                   |
|----------------------------------------------------------------------------------------------------------|---------------|-----------|---------|-------------------|
|                                                                                                          | Director      | 10% Owner | Officer | Other             |
| ALLIANZ GLOBAL INVESTORS OF AMERICA L P<br>800 NEWPORT CENTER DR<br>SUITE 600<br>NEWPORT BEACH, CA 92600 | Â             | Â         | Â       | Affiliated Entity |

## Signatures

Lagan Srivastava, Attorney in fact for Allianz Global Investors of America  
L.P.

05/09/2007

\_\_Signature of Reporting Person

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).

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.