MCGONIGLE JOHN W
Form 3
December 19, 2002

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

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(f) of the Investment Company Act of 1940

FORM 3

(Print or Type Responses)
1. Name and Address of Reporting Person*

McGonigle	John	W.
(Last)	(First)	(Middle)

c/o Federated Investors Inc.
1001 Liberty Avenue
(Street)

Pittsburgh	PA	15222
(City)	(State)	(Zip)

2. Date of Event Requiring Statement (Month/Day/Year)
12/19/2002

3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)

4. Issuer Name and Ticker and Ticker or Trading Symbol

Federated Premier Municipal Income Fund FMN

5. Relationship of Reporting Person(s) to Issuer: (Check all if applicable)
___ Director _____10% Owner
X Officer (give title below) _____Other (specify below)

Executive Vice President and Secretary

6. If Amendment, Date of Original (Month/Day/Year)

7. Individual or Joint/Group Filing (Check Applicable Limit)
___X___ Form filed by One Reporting Persons
_____ Form filed by More than One Reporting Persons

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)
No securities owned.			

* If the form is filed by more than one reporting person, see Instruction 5(b)(v).

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 (Instr. 4)		4. Convers or Exer Price o Derivat Securit
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
No securities owned.					

** Intentional misstaments 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.

/s/ John W. McGonigle December 19, 2002
**Signature of Reporting Person Date

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Washington, D.C. 20549

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2. Date of Event Requiring Statement (Month/Day/Year)
12/19/2002

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4. Issuer Name and Ticker and Ticker or Trading Symbol

Federated Premier Intermediate Municipal Income Fund FPT

5. Relationship of Reporting Person(s) to Issuer: (Check all if applicable)
Director _____10% Owner
X Officer (give title below) _____Other (specify below)

Executive Vice President and Secretary

6. If Amendment, Date of Original (Month/Day/Year)

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