

BURKE DONALD C  
Form 3  
December 22, 2005

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

OMB APPROVAL

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**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 DOLL ROBERT C JR		(Month/Day/Year)	SunAmerica Focused Alpha Large-Cap Fund, Inc. [FGI]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
800 SCUDDERS MILL			(Check all applicable)	
ROADS,Â			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
(Street)			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
PLAINSBORO,Â NJÂ 08536			(give title below)	(specify below)
(City)	(State)	(Zip)	Pf Mgr - CEO of sub-advisor	
			6. Individual or Joint/Group Filing(Check Applicable Line)	
			<input type="checkbox"/> Form filed by One Reporting Person	
			<input checked="" type="checkbox"/> Form filed by More than One Reporting Person	

**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)
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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 (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
DOLL ROBERT C JR 800 SCUDDERS MILL ROADS PLAINSBORO, NJ 08536	^	^	^ Pf Mgr - CEO of sub-advisor	^
FOSINA JOHN J MERRILL LYNCH 800 SCUDDERS MILL ROAD PLAINSBORO, NJ 08536	^	^	^ CAO of sub-advisor	^
Porcelli Frank 800 SCUDDERS MILL RD PLAINSBORO, NJ 08536	^	^	^ COO of sub-advisor	^
WORMAN GLENN C 800 SCUDDERS MILL ROAD PLAINSBORO, NJ 08536	^	^	^ CFO of sub-advisor	^
BURKE DONALD C ^	^	^	^ FVP, Treasurer of Sub-advisor	^
DONAHUE ANDREW C/O MERRILL LYNCH ASSET MANAGEMENT 800 SCUDDERS MILL ROAD PLAINSBORO, NJ 08536	^	^	^ Ch. Legal Off. of sub-advisor	^
Hiller Jeffrey 800 SCUDDERS MILL RD PLAINSBORO, NJ 08536	^	^	^ FVP, Ch. Compli Off of sub-adv	^
FULLERTON BRIAN 800 SCUDDERS MILL ROADS PLAINSBORO, NJ 08536	^	^	^ CIO of sub-advisor	^
Verage Thomas 800 SCUDDERS MILL ROAD PLAINSBORO, NJ 08536	^	^	^ Managing Dir. Equity Sub-adv	^
BENTLEY WILLIAM C/O MERRILL LYNCH INVESTMENT MANAGEMENT 800 SC UDDERS MILL ROAD PLAINSBORO, NJ 08536	^	^	^ SVP of sub-adv	^

## Signatures

Catherine Johnston, Power of  
Attorney

12/22/2005

\_\_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.