Direct (D)

or Indirect

(Instr. 5)

(I)

Security

Amount or

Number of

Shares

### Edgar Filing: MFS HIGH INCOME MUNICIPAL TRUST - Form 3

MFS HIGH INCOME MUNICIPAL TRUST Form 3 December 27, 2016 FORM 3 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(h) of the Investment Company Act of 1940

#### (Print or Type Responses)

1. Name and Person <u>*</u> Bohane	Address of Re Christophe		2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol MFS HIGH INCOME MUNICIPAL TRUST [CXE]						
(Last)	(First)	(Middle)	12/17/2016		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)			
111 HUNT	INGTON A	VENUE					-				
	(Street)			(Check all applicable)			6. Individual or Joint/Group				
BOSTON,	MA 02	199		-	0	10% C Other ) (specify belo		X_Form	ck Applicable Line) filed by One Reporting		
					Assista	ant Secretary	R	Form I Reporting I	iled by More than One Person		
(City)	(State)	(Zip)	Tal	ble I - No	Non-Derivative Securities Beneficially Owned						
1.Title of Sec (Instr. 4) Reminder: Re owned directly	port on a sepa y or indirectly		Ben		wned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) EC 1473 (7-02)	Owners (Instr. 5	hip	rect Beneficial		
	requi	red to respo	ained in this form and unless the for MB control numb	m displa	ys a						
	Table II - De	rivative Secu	rities Beneficially C	Owned (e.g	., puts, calls,	warrants, opt	ions, cor	vertible	securities)		
1. Title of De (Instr. 4)	rivative Secur	Expi	ate Exercisable and ration Date /Day/Year) Expiration	Securities Derivativ (Instr. 4)	nd Amount of 5 Underlying e Security	Conversion or Exercise Price of Derivative	se Forr Deri e Secu	vative urity:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
		Date	Expiration			Cit	D'	-+ (D)			

Exercisable

Date

Title

## OMB APPROVAL

OMB Number: 3235-0104 Expires: January 31, 2005 Estimated average burden hours per response... 0.5

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Bohane Christopher R. 111 HUNTINGTON AVENUE BOSTON, MA 02199	Â	Â	Assistant Secretary	Â			
Signatures							
Susan A. Pereira, By Power of Attorney	12/27/2016						
**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.