#### MYKRANTZ DONALD M

Form 4

March 01, 2012

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

**OMB APPROVAL** 

Expires:

January 31, 2005

0.5

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if no longer subject to Section 16. Form 4 or Form 5

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue.

30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* MYKRANTZ DONALD M

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

MFS HIGH INCOME MUNICIPAL TRUST [CXE]

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction

Director 10% Owner \_X\_ Other (specify Officer (give title

(Month/Day/Year) 09/01/2011

below) below) Advisor Officer

MFS INVESTMENT MANAGEMENT, 500 BOYLSTON

(Street)

STREET

4. If Amendment, Date Original

(Instr. 8)

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

(Instr. 4)

**BOSTON, MA 02116** 

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D)

5. Amount of Securities Beneficially Owned

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership

(Instr. 4)

(A)

(Instr. 3, 4 and 5)

Following Reported Transaction(s)

(Instr. 3 and 4) Code V Amount (D) Price

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Month/Day/Year)

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

#### Edgar Filing: MYKRANTZ DONALD M - Form 4

| 1. Title of | 2.          | 3. Transaction Date | 3A. Deemed         | 4.                | 5.                     | 6. Date Exercis | sable and | 7. Title and | d 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|-------------------|------------------------|-----------------|-----------|--------------|---------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | TransactionNumber |                        | Expiration Date |           | Amount of    | f Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code              | of                     | (Month/Day/Yo   | ear)      | Underlying   | g Security    | Secui  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8)        | Derivativ              | Derivative      |           | Securities   | (Instr. 5)    | Bene   |
|             | Derivative  |                     | •                  |                   | Securities<br>Acquired |                 |           | (Instr. 3 ar | nd 4)         | Owne   |
|             | Security    |                     |                    |                   |                        |                 |           |              | Follo         |        |
|             | •           |                     |                    |                   | (A) or                 |                 |           |              |               | Repo   |
|             |             |                     |                    |                   | Disposed               |                 |           |              |               | Trans  |
|             |             |                     |                    |                   | of (D)<br>(Instr. 3,   |                 |           |              |               | (Instr |
|             |             |                     |                    |                   |                        |                 |           |              |               |        |
|             |             |                     |                    | 4, and 5)         |                        |                 |           |              |               |        |
|             |             |                     |                    | Code V            | (A) (D)                | Data I          | 7mimatian | Title Am     | avet          |        |
|             |             |                     |                    | Code V            | (A) (D)                |                 |           | Title Am     | lount         |        |
|             |             |                     |                    |                   |                        | Exercisable I   | Date      | or           | 1             |        |
|             |             |                     |                    |                   |                        |                 |           |              | mber          |        |
|             |             |                     |                    |                   |                        |                 |           | of           |               |        |
|             |             |                     |                    |                   |                        |                 |           | Sha          | res           |        |

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MYKRANTZ DONALD M MFS INVESTMENT MANAGEMENT 500 BOYLSTON STREET BOSTON, MA 02116

Advisor Officer

## **Signatures**

Susan S. Newton, By Power of Attorney

03/01/2012

\*\*Signature of Reporting Person

Date

### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(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.

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