6. Nature of Indirect

Beneficial Ownership

(Instr. 5)

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PIONEER MUNICIPAL HIGH INCOME TRUST Form 3 December 22, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL

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. Title of Derivative Security

(Instr. 4)

1. Name and Address of Reporting Person <u>*</u> Johnson David F	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol PIONEER MUNICIPAL HIGH INCOME TRUST [MHI]				
(Last) (First) (Middle)	01/16/2009	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
60 STATE STREET, PIONEER INVESTMENTS		(Check	all applicable)			
(Street)			<pre>10% C Other (specify belo ant Treasurer</pre>	(ww)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person	
BOSTON, MA 02109					Form filed by More than One Reporting Person	
(City) (State) (Zip)	Table I - N	Non-Derivati	ive Securitie	es Ben	eficially Owned	
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Natu Owners (Instr. 5	•	
Reminder: Report on a separate line for eacound directly or indirectly.	ch class of securities benefic	ially SI	EC 1473 (7-02))		
information conta required to respo	oond to the collection of ined in this form are not nd unless the form displ IB control number.					
Table II - Derivative Secur	ities Beneficially Owned (e	.g., puts, calls,	warrants, opti	ions, co	nvertible securities)	

3. Title and Amount of

Securities Underlying

Amount or

Number of

Derivative Security

(Instr. 4)

Expiration Title

4.

Conversion

or Exercise

Derivative

Price of

Security

5.

Ownership

Derivative

Security:

Direct (D)

Form of

2. Date Exercisable and

Expiration Date

Exercisable Date

(Month/Day/Year)

Date

OMB AF	PROVAL
OMB Number:	3235-0104
Expires:	January 31 2005
Estimated a	

burden hours per response... 0.5

Shares or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Add	ress	Relationships					
Treporting of the Function of Function		10% Owner	Officer	Other			
Johnson David F 60 STATE STREET PIONEER INVESTMENT BOSTON, MA 02109	s Â	Â	Assistant Treasurer	Â			
Signatures							
David F. Johnson	12/22/2014						
<u>**</u> Signature of Reporting Person	Date						
E	D						

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.