#### DiLorenzo David L Form 3 January 03, 2012 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

### **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 <u>*</u> DiLorenzo David L			2. Date of Event Requi Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol MFS HIGH YIELD MUNICIPAL TRUST [CMU]					
(Last)	(First)	(Middle)	12/31/2011		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)			
500 BOYLS	TON STR	EET								
	(Street)			(Check a	(Check all applicable) 6. Individual or Joint/Gr					
BOSTON,Â	MAÂ 021	16		.e	10% Ow Other ) (specify below) reasurer	_X_Form Person Form	Filing(Check Applicable Line) _X_ Form filed by One Reporting			
(City)	(State)	(Zip)	Table	I - Non-Derivati	Non-Derivative Securities Beneficially Owned					
1.Title of Secur (Instr. 4)	ity			unt of Securities ially Owned	Ownership C	. Nature of Ind Ownership Instr. 5)	irect Beneficial			
Reminder: Repo owned directly	•	ate line for ea	ch class of securities be	neficially SE	EC 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.										
T	able II - Der	ivative Secu	rities Beneficially Own	ed (e.g., puts, calls,	warrants, optio	ns, convertible	e securities)			
1. Title of Deri (Instr. 4)	vative Securi	Expir	ration Date Se Day/Year) De	Title and Amount of curities Underlying erivative Security astr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			

Date

Exercisable

Expiration

Title

Date

Security:

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

<sup>3235-0104</sup> Number: January 31, Expires: 2005 Estimated average burden hours per response... 0.5

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
1 8	Director	10% Owner	Officer	Other		
DiLorenzo David L 500 BOYLSTON STREET BOSTON, MA 02116	Â	Â	Treasurer	Â		
Signatures						
Susan S. Newton, By Power of Attorney	01/03/2012					
**Signature of Reporting Person		Dat	e			

## **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.