Invesco Municipal Opportunity Trust Form 4 January 10, 2017

| FORM 4 UNITED  |  |   |  |   |   |  |  | PPROVAL   |  |  |
|--|--|---|--|---|---|--|--|---|--|--|
| Washington, D.C. 20549   |  |   |  |   |   |  | OMB<br>Number:   | 3235-0287   |  |  |
| Check this box<br>if no longer   |  |   |  |   |   | Expires:   | January 31,<br>2005  |   |  |  |
| Section 16.<br>Form 4 or   | subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>Section 16. SECURITIES |   |  |   |   |  |  | average<br>irs per<br>0.5   |  |  |
| Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |  |   |  |   |   |  |  |   |  |  |
| (Print or Type Responses)  |  |   |  |   |   |  |  |   |  |  |
| 1. Name and Address of Reportin<br>WOOLSEY SUZANNE   | ssuer Name <b>and</b> Ticker or Trading<br>ol  |   |  | 5. Relationship of Reporting Person(s) to Issuer      |   |  |  |   |  |  |
| Invesco Municipal Opportunity Trust<br>[VMO]   |  |   |  | (Che  | eck all applicable)                                       |  |  |   |  |  |
| (Last) (First)   | (Middle)   | 3. Date of Earliest Transaction<br>(Month/Day/Year)     |  |   | Director 10% Owner<br>Officer (give titleX Other (specify |  |  |   |  |  |
| 1555 PEACHTREE STREI<br>NE, SUITE 1800   | 12/31/2016   |   |  |   | below)  | below)<br>Trustee  |  |   |  |  |
| (Street)   |  | 4. If Amendment, Date Original<br>Filed(Month/Day/Year) |  |   |   | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person            |  |   |  |  |
| ATLANTA, GA 30309  |  |   |  |   |   |  | More than One Ro   |   |  |  |
| (City) (State)   | (Zip)  | Table   | e I - Non-De                           | erivative So  | ecurities Ac  | quired, Disposed o   | of, or Beneficia   | lly Owned   |  |  |
| 1.Title of<br>Security<br>(Instr. 3)2. Transaction E<br>(Month/Day/Yes)  | ar) Executio<br>any  | med<br>on Date, if<br>Day/Year)                         | 3.<br>Transactio<br>Code<br>(Instr. 8) | 4. Securiti<br>onAcquired<br>Disposed<br>(Instr. 3, 4 | (A) or<br>of (D)  | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| Common<br>Shares   |  |   | Code V                                 | Amount  | (D) Price   | 360  | Ι  | By Trust  |  |  |

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

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 Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---------------------------------------|---|---------------------|--------------------|--|--|---|---|
|   |   |   | Code V                                |   | Date<br>Exercisable | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |   |

## Edgar Filing: Invesco Municipal Opportunity Trust - Form 4

## **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |            |         |         |  |  |  |
|--|---------------|------------|---------|---------|--|--|--|
| reporting o when reality reacted   | Director      | 10% Owner  | Officer | Other   |  |  |  |
| WOOLSEY SUZANNE<br>1555 PEACHTREE STREET NE<br>SUITE 1800<br>ATLANTA, GA 30309 |               |            |         | Trustee |  |  |  |
| Signatures   |               |            |         |         |  |  |  |
| Robert R. Leveille, as Attorney in Fact  |               | 01/10/2017 |         |         |  |  |  |
| **Signature of Reporting Person  |               | Date       |         |         |  |  |  |
| Evalenction of Deer  |               |            |         |         |  |  |  |

## **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).

## **Remarks:**

This Form 4 reports that effective as of 12/31/2016 the reporting person is no longer subject to Section 16 reporting.

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.