



**Part II** Organizational Action (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ \_\_\_\_\_  
Internal Revenue Code Sections 301, 316, 852.

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18 Can any resulting loss be recognized? ▶ No

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19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ \_\_\_\_\_  
This organizational action is reportable with respect to calendar year 2019.

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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**  
Signature ▶ /s/ Sheri Morris Date ▶ \_\_\_\_\_

<b>Paid Preparer Use Only</b>	Print your name ▶ Sheri Morris	Preparer's signature	Title ▶ President & Treasurer	Check <input type="checkbox"/> if self-employed	PTIN
	Print/Type preparer's name		Date		
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no.	

**Invesco Municipal Trust**  
**EIN: 36-3779776**

ATTACHMENT

	<u>CUSIP</u>	<u>Ticker Symbol</u>	<u>Payable Date</u>	<u>Per Share</u>		<u>ROC</u>
				<u>Distribution Per Share</u>	<u>Income Dividends</u>	
Class A	46131J103	VKQ	01/31/19	0.05250000	0.03980000	0.01270000
Class A	46131J103	VKQ	02/28/19	0.05250000	0.03980000	0.01270000
<b>Total</b>				<b>0.10500000</b>	<b>0.07960000</b>	<b>0.02540000</b>