Invesco Value Municipal Income Trust Form 3 September 08, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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> Â WOOLSEY SUZANNE | | | 2. Date of Event Requiring Statement (Month/Day/Year) | 3. Issuer Name and Ticker or Trading Symbol Invesco Value Municipal Income Trust [IIM] | | | | |
|--|--------------------|----------------------------|---|--|--|----------------------------|--|--|
| (Last) (Fi | irst) | (Middle) | 08/29/2014 | 4. Relationship of Reporting Person(s) to Issuer | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | |
| 815 CUMBERSTONE ROAD (Street) HARWOOD, MD 20776 | | | | (Check all applicable) Director 10% Owner Officer X_Other (give title below) (specify below) Trustee | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | |
| (City) (St | tate) | (Zip) | Table I - N | lon-Derivati | ive Securiti | es Bei | neficially Owned | |
| 1.Title of Security (Instr. 4) | | | 2. Amount of Beneficially (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nat Owner (Instr. | 1 | |
| Common Shares | 5 | | 0 | | D | Â | | |
| Reminder: Report or owned directly or ind | - | e line for eac | ch class of securities benefici | ally SI | EC 1473 (7-02) |) | | |
| | informa require | ation conta d to respor | oond to the collection of ined in this form are not nd unless the form displa IB control number. | | | | | |
| Table | II - Deriv | vative Secur | ities Beneficially Owned (e. | g., puts, calls, | warrants, opt | ions, co | onvertible securities) | |

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | | 4. Conversion or Exercise Price of | 5. Ownership Form of Derivative | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|--|--------------------|--|------------------------|---|--|---|
| | Date Exercisable | Expiration Date | Title | Amount or Number of | Derivative Security | Security: Direct (D) or Indirect | |

OMB APPROVAL

Estimated average burden hours per

3235-0104

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Shares (I) (In

(Instr. 5)

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|---------|---------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| WOOLSEY SUZANNE 815 CUMBERSTONE ROAD HARWOOD, MD 20776 | Â | Â | Â | Trustee | | |
| Signatures | | | | | | |
| Todd L.Spillane, as Attorney in Fact | 09/08/2014 | | | | | |
| **Signature of Reporting Person | | Date | | | | |
| | | | | | | |

Explanation of Responses:

- * 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).

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Remarks:

No securities are beneficially owned.

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.