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PIONEER MUNICIPAL HIGH INCOME ADVANTAGE TRUST Form 3 September 23, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB 3235-0104

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)

 Name and Address of Reporting Person <u>*</u> Â Jones Lisa 			2. Date of Event R Statement (Month/Day/Year) 09/16/2014	PIONEE	3. Issuer Name and Ticker or Trading Symbol PIONEER MUNICIPAL HIGH INCOME ADVANTAGE TRUST [MAV]					
(Last)	(First)	(Middle)	09/10/2014		4. Relationship of Reporting Person(s) to Issuer				ndment, Date Original th/Day/Year)	
60 STATE S	TREET								,	
	(Street)			(Che	(Check all applicable)			5. Individu	ual or Joint/Group	
BOSTON, MA 02109				X Offic (give title be	Director 10% Owner C Officer Other title below) (specify below) Chief Executive Officer		v) F	X_Form f	ck Applicable Line) Filed by One Reporting filed by More than One Person	
(City)	(State)	(Zip)	Ta	ble I - Non-Deriv	vative	Securitie	s Beneficially Owned			
1.Title of Security (Instr. 4)			Ber	2. Amount of Securities Beneficially Owned (Instr. 4)		B. 4. Nature of Indirect Beneficial Ownership Ownership Form: (Instr. 5) Direct (D) or Indirect I) Instr. 5)				
Reminder: Report on a separate line for each class of securities benefic owned directly or indirectly.					ially SEC 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. Table II - Derivative Securities Beneficially Owned (<i>e.g.</i> , puts, calls, warrants, options, convertible securities)										
-				,						
1. Title of Deriv (Instr. 4)	ative Security	Expir	te Exercisable and ration Date Day/Year)	3. Title and Amoun Securities Underlyi Derivative Security	ng	4. Conversion or Exercise		nership m of	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

		(Instr. 4)		Price of	Derivative
Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect

(Instr. 5)

Reporting Owners

Reporting Owner Name / Add	lress	Relationships					
		Director 10% Owner Officer		Other			
Jones Lisa 60 STATE STREET BOSTON, MA 02109	Â	Â	Chief Executive Officer	Â			
Signatures							
Lisa Jones	09/22/2014						
<u>**</u> Signature of Reporting Person	Date						

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.