FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)													
1. Name and Address of Reporting Person *- BANK OF AMERICA CORP /DE/				2. Issuer Name and Ticker or Trading Symbol Invesco Municipal Premium Income Trust					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title below) Check all applicable) 10% Owner Officer (give title below)						
(Last) (First) (Middle) BANK OF AMERICA CORPORATE CENTER, 100 N TRYON ST			[PIA] 3. Date of Earliest Transaction (Month/Day/Year) 01/25/2012				Office	r (give title beic	<u></u>	Other (specify	below)				
GILLA DI A	OFFICE NA	(Street)		4. If Amendment, l	Date Origin	nal Fi	led(Month/l	Day/Year)		Form file	ed by One Repo		Check Applica	ible Line)	
(City)	OTTE, NC	(State)	(Zip)	Tal	blo I Nov	Dow	ivativa C		A	ined Dien	and of ou I	Donoficially	Oremod		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)				uired of (D)	red 5. Amount of Securities Beneficially Owned Folk Reported Transaction(s)		es Following	6.	7. Nature of Indirect Beneficial Ownership		
					Code	V	Amount	(A) or (D)	Price	`	or In		or Indirect (I) (Instr. 4)	ect (Instr. 4)	
Auction I	Rate Prefe	rred (1)	01/25/2012		J(2)		16	D	(2)	420			I	See Footnote (1)	
Auction I	Rate Prefe	rred (1)	01/25/2012		J(2)		7	D	(2)	413			I	See Footnote (1)	
Auction I	Rate Prefe	rred (1)	01/25/2012		J ⁽²⁾		15	D	<u>(2)</u>	398			I	See Footnote	
Auction I	Rate Prefe	rred (1)	01/25/2012		J(2)		14	D	(2)	384			I	See Footnote (1)	
Auction I	Rate Prefe	rred (1)	01/25/2012		J <u>(2)</u>		12	D	(2)	372			I	See Footnote (1)	
Reminder: 1	Report on a s	separate line fo	r each class of secur	ities beneficially ow		Pers	ons who ained in	respon this for	m are	e not requ		formation spond unleader	ess	1474 (9-02)	
				Derivative Securition	-			*		•					
Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/\footnote{\text{V}}	3A. Deemed Execution Date Year) any	4. Transaction Code (Instr. 8)	5.	6. Da	ate Exerci Expiration nth/Day/Y	sable 1 Date	7. T Am Und Sect	Pitle and ount of derlying urities tr. 3 and		9. Number Derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Owners Form o Derivat Security Direct (or Indir	f Beneficial Ownership y: (Instr. 4)	
				Code V	(A) (D)	Date Exer		Expiration Date	Title	or Number of Shares					

Reporting Owners

Relationships	

Reporting Owner Name / Address	Director	10% Owner	Officer	Other
BANK OF AMERICA CORP /DE/ BANK OF AMERICA CORPORATE CENTER 100 N TRYON ST CHARLOTTE, NC 28255		X		
Blue Ridge Investments, L.L.C. 214 NORTH TRYON STREET CHARLOTTE, NC 28255		X		

Signatures

/s/ John Hiebendahl	01/27/2012			
**Signature of Reporting Person	Date			
/s/ Michael Didovic	01/27/2012			
**Signature of Reporting Person	Date			

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).
- (1) The Auction Rate Preferred Shares ("Shares") reported in Table I represent shares beneficially owned by Blue Ridge Investors, L.L.C. ("Blue Ridge"). Blue Ridge is a wholly owned subsidiary of Bank of America Corporation ("Bank of America").
- (2) The Shares were called for redemption by the issuer at par value.

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.