Edgar	Filina:	PUTNAM	MANAGED	MUNICIPAL	INCOME	TRUST -	Form	5
- 3	3							

PUTNAM MANAGED MUNICIPAL INCOME TRUST Form 5

D

December 14	, 2010												
FORM	5										PROVAL		
		D ST	ATES S		ITIES AND		NGE	СОМ	MISSION	OMB Number:	3235-0362		
Check this l no longer su				Wasl	nington, D.	C. 20549				Expires:	January 31, 2005		
to Section 1 Form 4 or F 5 obligation may continu	16. Form Al ns ue.	ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Estimated average burden hours per response 1			
See Instruct 1(b). Form 3 Hol Reported Form 4 Transaction Reported	Filed j		of the Pu	ıblic Uti	(a) of the Se lity Holding restment Co	g Company	Act	of 193					
1. Name and Ac Drucker Myr	ddress of Report	ing Pers	S	ymbol	ame and Tick			5. Ro Issue	elationship of F er	Reporting Perso	on(s) to		
				PUTNAM MANAGED MUNICIPAL INCOME TRUST [PMM]					(Check all applicable) <u>X</u> _Director Officer (give title below) <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u> <u>Director</u>				
(Last) (First) (Middle)				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 10/31/2010									
	NVESTMEN CE SQUARE		ONE										
	(Street)				dment, Date O h/Day/Year)	Priginal		6. In	dividual or Join	nt/Group Repo	orting		
BOSTON,Â	MAÂ 02109								Form Filed by Or Form Filed by Mo on				
(City)	(State)	(Zip))	Table	I - Non-Deriv	ative Securi	ties A	cquired	, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	any		eemed ion Date, if n/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)			Securities Beneficially Owned at end of Issuer's	Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Amount	(A) or (D)	Price \$	Fiscal Year (Instr. 3 and 4)	(Instr. 4)			
Closed-end Fund	10/31/2010 <u>(</u>	(1)	Â		J	18.3407	А	7.73 (2)	265.0555	D	Â		

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

Persons who respond to the collection of information SEC 2270 contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(9-02)

Edgar Filing: PUTNAM MANAGED MUNICIPAL INCOME TRUST - Form 5

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Unde: Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. of D Se B O E I S Fi (I
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Add	Relationships						
Reporting O when Funite, Fidu	Director	10% Owner	Officer	Other			
Drucker Myra R PUTNAM INVESTMENTS ONE POST OFFICE SQUA BOSTON, MA 02109		ÂX	Â	Â	Â		
Signatures							
Myra R. Drucker	12/14	/2010					
<u>**</u> Signature of Reporting Person	Da	ate					

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) Dividends reinvested for fiscal year end 10/31/2010.
- (2) Price as of 10/31/2010.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.