MainStay DefinedTerm Municipal Opportunities Fund Form 4 March 02, 2017

FORN	ГЛ	STATES SECU	DITIES A	ND FY	СПА	NCECC	MMISSION		PROVAL			
Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction See In												
1(b). (Print or Type Responses)												
1. Name and A Fisher Stepl	Address of Reporting F hen P.	Symbol MainS	er Name <b>and</b> tay Define tunities Fu	edTerm I	Muni	I	. Relationship of I ssuer (Check	Reporting Pers				
(Last)	(First) (M		of Earliest T Day/Year) 2014	ransaction			Director 10% Owner X Officer (give title 0ther (specify below) below)					
JI WADIS								President	(6) 1			
(Street)       4. If Amendment, Date Original       6. Individual or Joint/Group Filing(Check         Filed(Month/Day/Year)       Applicable Line)         _X_Form filed by One Reporting Person									rson			
(City)												
1.Title of Security (Instr. 3)	1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if			Code (Instr. 3, 4 and 5) ear) (Instr. 8) (A)				Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)					
Shares of beneficial interest	02/19/2014		S	2,000	D	\$ 16.9118	0	D				
Shares of beneficial interest	11/11/2016		A	102	A	\$ 18.44	102	D				
Shares of beneficial interest	11/14/2016		A	2,398	A	\$ 18.4	2,500	D				
Shares of beneficial	11/14/2016		А	1,600	А	\$ 18.01	4,100	D				

interest							
Shares of beneficial interest	11/18/2016	А	250	А	\$ 18.01	4,350	D
Shares of beneficial interest	01/11/2017	S	2,150	D	\$ 19.03	2,200	D
Shares of beneficial interest	01/11/2017	S	1,900	D	\$ 19.04	300	D
Shares of beneficial interest	01/11/2017	S	300	D	\$ 19.045	0	D

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

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 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)	4. Transactie Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans
				of (D)						(Instr
				(Instr. 3,						
				4, and 5)						
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Fisher Stephen P.								
51 MADISON AVENUE			President					
NEW YORK, NY 10010								

## Signatures

/s/Thomas C. Humbert, Jr., Attorney-in-Fact

03/02/2017

\*\*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).

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.