Edgar Filing: IVES J ATWOOD - Form 4

IVES J ATV	WOOD											
Form 4												
June 29, 201	10											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	NOMB Number:	3235-0287		
Check this box if no longer subject to STATEMENT OF CHA				IANGES IN BENEFICIAL OWNERSHIP OF					Expires:	January 31,		
									Estimated	Expired: 2005 Estimated average burden hours per		
	Section 10.				SECURITIES							
Form 4 Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	. 0.5		
obligatio	$\frac{1}{2}$ Section 17(of 1935 or Section	on			
may con See Instr	lunue.			nvestment	•	-	•					
1(b).					-	•						
(Print or Type	Responses)											
× •••												
IVES J ATWOOD Symbo MFS			2. Issue Symbol	Issuer Name and Ticker or Trading bol				5. Relationship of Reporting Person(s) to Issuer				
			MFS CALIFORNIA INSURED MUNICIPAL FUND [CCA]				D	(Check all applicable)				
(Last)	(First) (A	Middle)		of Earliest T	ransaction			X Director Officer (giv		% Owner her (specify		
				Month/Day/Year) 2/31/2009			below) below)					
MANAGE	MENT, 500 BOY	LSTON	12,01,1									
STREET												
			4. If Am	mendment, Date Original			6. Individual or Joint/Group Filing(Check Applicable Line)					
			Filed(Mo	Month/Day/Year)								
BOSTON,	MA 02116							_X_ Form filed by Form filed by Person	One Reporting P More than One R			
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Secu	rities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	2A. Deemo	ed	3.	4. Securit	ies		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)		TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)					Form: Direct			
(Instr. 3)								Beneficially Owned	(D) or Indirect (I)	Ownership		
		·	•				U	(Instr. 4)	(Instr. 4)			
						(A)		Reported Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
				Coue V	mount	(D)	Thee					
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned di	rectly o	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)

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1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactie	5. onNumber	1	Date	Amou	le and unt of	8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivati	ive	e		rities	(Instr. 5)	Bene
	Derivative				Securiti	es		(Instr	. 3 and 4)		Owne
	Security				Acquire	d					Follo
					(A) or						Repo
					Dispose	d					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				
IVES J ATWOOD MFS INVESTMENT MANAGEMENT 500 BOYLSTON STREET BOSTON, MA 02116	Х							
Signatures								
Susan S. Newton, By Power of Attorney	06/29/2010							
Signature of Reporting Person	D	ate						
Evaluation of Responses:								

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.