## Edgar Filing: MFS GOVERNMENT MARKETS INCOME TRUST - Form SC 13G/A

MFS GOVERNMENT MARKETS INCOME TRUST Form SC 13G/A December 06, 2001 THIS PAPER DOCUMENT IS BEING SUBMITTED PURSUANT TO RULE 901 9(d) OF REGULATION S-T UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 SCHEDULE 13G Under the Securities Exchange Act of 1934 (Amendment No. 3)\* MFS Government Markets Income Trust (Name of Issuer) Common Stock, Par Value \$0.00 per share (Title of Class of Securities) 552939100 (CUSIP Number) (Date of Event Which Requires Filing of this Statement) Check the appropriate box to designate the rule pursuant to which this Schedule is filed: [X ] Rule 13d-1(b) [] Rule 13d-1(c) [ ] Rule 13d-1(d) CUSIP No. 552939100 1. Names of Reporting Persons. I.R.S. Identification Nos. of above persons (entities only). First Union Corporation 56-0898180 2. Check the Appropriate Box if a Member of a Group (See Instructions) (a) (b) З.

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4. Citizenship or Place of Organization North Carolina Number of Shares Beneficially Owned by Each Reporting Person With 5. 9988221 Sole Voting Power 6. Shared Voting Power 0 7. Sole Dispositive Power 9998745 8. Shared Dispositive Power 2000 9. Aggregate Amount Beneficially Owned by Each Reporting Person 10005745 10. Check if the Aggregate Amount in Row (11) Excludes Certain Shares (See Instructions) Not Applicable. 11. Percent of Class Represented by Amount in Row (11) 16.75% 12. Type of Reporting Person (See Instructions) Parent Holding Company (HC) Item 1. (a)Name of Issuer MFS Government Markets Income Trust (b) Address of Issuer's Principal Executive Offices 500 Boylston Street 15th Floor Boston, MA 02116 Item 2. (a) Name of Person Filing First Union Corporation

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(b) Address of Principal Business Office or, if none, Residence One First Union Center Charlotte, North Carolina 28288-0137 (c) Citizenship North Carolina (d) Title of Class of Securities Common Stock, Par Value \$.01 per share (e) CUSIP Number 337358105 Item 3. If this statement is filed pursuant to 240.13d-1(b) or 240.13d-2(b) or c), check whether the person filing is a: (g)[X ] A parent holding company or control person in accordance with 240.13d-1(b)(1)(ii)(G); Item 4. Ownership. Provide the following information regarding the aggregate number and percentage of the class of securities of the issuer identified in Item 1. (a) Amount beneficially owned: 10005745. (b) Percent of class: 16.75%. (C) Number of shares as to which the person has: (i) Sole power to vote or to direct the vote 9988221. (ii) Shared power to vote or to direct the vote 0. (iii) Sole power to dispose or to direct the disposition of 9998745. (iv) Shared power to dispose or to direct the disposition of 2000.

Item 5.

Edgar Filing: MFS GOVERNMENT MARKETS INCOME TRUST - Form SC 13G/A Ownership of Five Percent or Less of a Class If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than five percent of the class of securities, check the following []. Item 6. Ownership of More than Five Percent on Behalf of Another Person. Not Applicable. Item 8. Identification and Classification of Members of the Group Not Applicable. Item 9. Notice of Dissolution of Group Not Applicable. Item 10. Certification (a) The following certification shall be included if the statement is filed pursuant to 240.13d-1(b): By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect. SIGNATURE After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct. 12/06/2001 Date Signature Karen F. Knudtsen, Vice President & Trust Officer Name/Title

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