MFS INTERMEDIATE HIGH INCOME FUND Form 3 July 03, 2007 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> ADDEO JOHN	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol MFS INTERMEDIATE HIGH INCOME FUND [CIF]						
(Last) (First) (Middle)	06/29/2007	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)			
500 BOYLSTON STREET								
(Street)		Director 10% Owner Filing Officer X_Other _X_Fe (give title below) (specify below) Portfolio ManagerFe		6. Individu	al or Joint/Group			
BOSTON, MA 02116				r Filing(Che _X_ Form f Person Form f	Filing(Check Applicable Line) _X_ Form filed by One Reporting			
(City) (State) (Zip)	Table I - I	- Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)	Owned C F C o (1	Ownership Ow	Vature of India rnership str. 5)	rect Beneficial			
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)								
Persons who information co required to res	espond to the collection of ntained in this form are no bond unless the form disp OMB control number.	t						
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
(Instr. 4) E	piration Date Securit	e and Amount of ies Underlying tive Security 4)		5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			

Exercisable Date

Direct (D)

or Indirect

(Instr. 5)

(I)

Security

Amount or

Number of

Shares

Title

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address	Relationships				
1 8	Director	10% Owner	Officer	Other	
ADDEO JOHN 500 BOYLSTON STREET BOSTON, MA 02116	Â	Â	Â	Portfolio Manager	
Signatures					
Susan S. Newton, By Power of Attorney	07/03/2007				
**Signature of Reporting Person		Date			

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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.