FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D.C. 20549 |
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| Check this box if no longer subject to | |
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| Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>CARROLL MILTON</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol CENTERPOINT ENERGY INC [CNP] | | | | | | | | | heck all | ship of Report applicable) irector | ing P | erson(s) to Is | | |
|--|---|--|--|---------|--|--|---------|-------|------------------------------|----------------------------|--|--|-------------------------------|------------------|---|---|--|---|--|--|
| (Last) | (Fi | rst) (| Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 05/17/2019 X Officer (give titl below) Execution | | | | | | | | | | | Other below) hairman | (specify | | | |
| (Street) HOUSTO | | | 77002 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ne) <mark>X</mark> F F | ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Sec | curitie | s Acc | quired, | Dis | posed o | f, or | Bene | eficia | lly Ov | /ned | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date, | | | 3. Transa Code (8) | | ecurities Acquired (A) or losed Of (D) (Instr. 3, 4 a | | | d Se Be Ov | Amount of curities neficially ned Following | Fo (D) | Ownership rm: Direct) or Indirect (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A (I | A) or D) | Price | Tra | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | |
| Common | Stock | | | 05/17 | 05/17/2019 S 12,000 D \$29.76 98,301 D | | | | | | | | | | | | | | | |
| Common | ommon Stock 05/20/2 | | | | | 2019 | | | S | | 7,780 | 7,780 D \$ | | \$29. | 62 90,521 ⁽¹⁾ | | | D | | |
| | | Та | | | | | | | , | | sed of, onvertib | | | , | Own | ed | • | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Executior if any (Month/Da | Date, | | ransaction ode (Instr. | | of | | xercis on Dat Day/Ye | | 7. Title and Amount of Securities Underlying Derivative Security (Instrand 4) | | str. 3 | 8. Price Derivativ Security (Instr. 5) | derivative Securities | ly | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | | Date Exercisa | | Expiration Date | Title | Amo or Num of Sha | nber | | | | | | |

Explanation of Responses:

1. Total includes (i) 22,873 time-based restricted stock units ("RSUs") awarded under Issuer's Long-term Incentive Plan (the "Plan") and vesting in February 2020, (ii) 23,906 RSUs awarded under Plan and vesting in February 2021 and (iii) 23,742 RSUs awarded under Plan and vesting in February 2022. The award to vest in 2020 shall vest if Reporting Person continues to be an employee of Issuer from grant date through vesting date and on a pro-rata basis in event of his earlier retirement, disability or death. The awards to vest in 2021 and 2022 shall vest (i) if he continues to be an employee of Issuer from grant date through vesting date and (ii) in event of his disability or death. Also, the awards to vest in 2021 and 2022 shall vest on a pro-rata basis in event of his retirement unless he satisfies conditions for full vesting. For all above awards, Reporting Person is treated as currently retirement eligible.

Remarks:

Vincent A. Mercaldi, Attorney-05/21/2019 in-Fact

** Signature of Reporting Person Date

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

- * 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.

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 Number.