FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

<b>STATEMENT</b>	OF CHANGES IN E	BENEFICIAL O	WNERSHIP

OMB APPRO	JVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*  MCGOLDRICK JOSEPH B					2. Issuer Name and Ticker or Trading Symbol  CENTERPOINT ENERGY INC [ CNP ]										all app	ship of Reporting F applicable) rector ficer (give title		Person(s) to Issuer  10% Owner  Other (specify			
(Last) 1111 LO	(Last) (First) (Middle) 1111 LOUISIANA				3. Date of Earliest Transaction (Month/Day/Year) 02/19/2015										belov	v) ``	- Div	below)  Div Pres			
(Street) HOUSTO			77002 Zip)		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Indiv ine) X	ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
Date			2. Transa Date (Month/E		Execution Date,		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			and Securit Benefic		ties cially I Following	Form:	nership : Direct · Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount		(A) or (D)	Price	e	Transa	action(s) 3 and 4)			(111501.4)	
Common Stock 02/1			02/19	/2015	2015		A		9,770(	1)	A	\$0	.00	70	,858 <sup>(2)</sup>	D					
Common Stock															16,363			I	By Savings Plan <sup>(3)</sup>		
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)  (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  Execution Date if any (Month/Day/Year)				Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3		vative urity :r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Or Fo Di or (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nur of	ount nber res							

## Explanation of Responses:

- 1. Time-based restricted stock units vesting in February 2018 if the Reporting Person continues to be an employee of Issuer from the grant date through the vesting date and on a pro-rata basis in the event of his earlier retirement, disability or death.
- 2. Total includes 7,800 time-based restricted stock units previously awarded under the Issuer's Long-term Incentive Plan and vesting in February 2017 if the Reporting Person continues to be an employee of Issuer from the grant date through the vesting date and on a pro-rata basis in the event of his earlier retirement, disability or death.
- $3.\ Equivalent\ shares\ held\ in\ CenterPoint\ Energy,\ Inc.\ Savings\ Plan\ as\ of\ 01/31/2015.$

## Remarks:

<u>Vincent A. Mercaldi Attorney-in-Fact</u>

02/23/2015

\*\* 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.