FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
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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*  WALKER R A  2. Date of Event Requiring Statement (Month/Day/Year) 04/22/2010			nent	3. Issuer Name and Ticker or Trading Symbol  CENTERPOINT ENERGY INC [ CNP ]							
(Last) 1111 LOUISI (Street) HOUSTON	(First) ANA TX	(Middle)				ationship of Reporting Perso c all applicable) Director Officer (give title below)	on(s) to Issu 10% Owr Other (sp below)	er	(Mon	hth/Day/Year) dividual or Joint cable Line) Form filed b	Ate of Original Filed  /Group Filing (Check  y One Reporting Person  y More than One
(City)	(State)	(Zip)								Reporting P	
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)						ınt of Securities ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
No securities are beneficially owned						0	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
Title of Derivative Security (Instr. 4)     Expiration Date (Month/Day/Year)		ate	Underlying Derivative Security (Instr. 4) C		4. Conve	ercise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiration Date	n Title	÷	Amount or Number of Shares	Price Deriva Secur	ative	Direct (D) or Indirect (I) (Instr. 5)	

**Explanation of Responses:** 

Remarks:

R.A. Walker 04/22/2010

\*\* Signature of Reporting Person Dat

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).