FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL									
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Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol CENTERPOINT ENERGY INC [CNP]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
CARRO	OLL MIL	<u>TON</u>			151	JI V I	LICI	<u> </u>	LIVE		<u> </u>	GIV.	1]		X	Direc	ctor		10% C	wner
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 06/01/2015								\dashv	X		Officer (give title below)		Other (specify below)		
1111 LOUISIANA				06/										Executive Chairman						
(Street)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
HOUSTO	ON T	ζ 7	77002												X Form filed by One Reporting Pers					on
(City)	(St	ate) (Zip)												Form filed by More than One Reporting Person					orting
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date					Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)			ities Acquired (A) d Of (D) (Instr. 3, 4			1 and Secu Bene		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(1130.4)	
Common Stock				06/01/2015					F		8,205(1	(1) D S		\$20	0.22 177,213 ⁰		7,213 ⁽²⁾	I)	
	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)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		Date,	4. Transaction Code (Instr. 8)			ative rities ired osed	6. Date E Expiratio (Month/D	on Dat	e Am ar) Set Un Det Set and		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owi For Dire or Ii (I) (I	nership m: ect (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- $1. \ Shares \ withheld \ for \ taxes \ upon \ vesting \ of \ time-based \ restricted \ stock \ units.$
- 2. Total includes (i) 15,190 time-based restricted stock units previously awarded under the Issuer's Long-term Incentive Plan ("LTIP") 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, (ii) 16,660 time-based restricted stock units previously awarded under the LTIP and 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, (iii) 60,000 shares previously awarded under the LTIP and vesting in 30,000 share increments in each of June 2016 and June 2017 in connection with and contingent on his service as Executive Chairman of the Issuer on the respective vesting dates.

Remarks:

<u>Vincent A. Mercaldi Attorney-</u> in-Fact <u>06/03/2015</u>

** 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.