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Reynolds Cat	herine M										
Form 4											
January 18, 2	019										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										PPROVAL	
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no long	or.									January 31, 2005	
subject to	STATEM	ENT OF	CHAN			CIAI	L OW	NERSHIP OF	Estimated a		
Section 16.				SECURITIES					burden hou	rs per	
Form 4 or Form 5		C		$(\cdot) = f(\cdot)$	G	. F	. 1	- A - + - £ 1024	response 0.5		
obligation							•	e Act of 1934, f 1935 or Sectio	n		
may conti	nue.			•	Company				11		
See Instru 1(b).	ction	50(11)		vestment v	company	1101	0117-	10			
(Print or Type R	esponses)										
1 Nama and A	1	*						5 Deletienskin of		(-) +-	
				2. Issuer Name and Ticker or Trading				5. Relationship of Issuer	Reporting Pers	son(s) to	
recynolds ed	Symbol										
(7))		CMS ENERGY CORP [CMS]				(Check all applicable)					
				. Date of Earliest Transaction				Dimeter	100	0	
			(Month/Day/Year) 01/16/2019					Director 10% Owner Officer (give title Other (specify below) below) SVP and General Counsel			
				. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed				th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
JACKSON,	MI 49201							Form filed by M	Nore than One Re		
								Person			
(City)	(State) (Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Date		med3.4. Securities Acquiredon Date, ifTransaction(A) or Disposed of CodeCode(D)Day/Year)(Instr. 8)(Instr. 8)(Instr. 3, 4 and 5)						6. Ownership		
Security	(Month/Day/Year)							Securities Beneficially	Form: Direct	Indirect Beneficial	
(Instr. 3)		any (Month/E						Owned		Ownership	
		X		(Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
						or		(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price	,			
Common Stock	01/16/2019			А	19,786 (1)	А	\$0	143,147	D (2)		
STOCK					<u> </u>						

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

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 control number.

 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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact: Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Reynolds Catherine M ONE ENERGY PLAZA JACKSON, MI 49201			SVP and General Counsel			
Signatures						
Ashley L. Bancroft, Attny-in-Fact	C	1/18/2019				
**Signature of Reporting Person		Date				

Explanation of Responses:

- * 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).
- (1) Restricted Stock granted by CMS Energy Corporation ("CMS") pursuant to CMS' Performance Incentive Stock Plan and subject to a three-year "cliff" vesting schedule.

The total holdings reflect an adjustment of 6 additional shares of Common Stock of CMS Energy Corporation ("CMS") acquired as a result of dividend reinvestment pursuant to the reporting person's participation in the CMS Stock Purchase Plan, and an adjustment of

(2) 1,152 additional shares of Restricted Stock purchased on behalf of the reporting person as a result of an automatic acquisition of Restricted Stock in lieu of cash dividends pursuant to the terms of the award granted to the reporting person in accordance with the provisions of the CMS Performance Incentive Stock Plan.

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.