Edgar Filing: CMS ENERGY CORP - Form 4

CMS ENER	GY CORP										
Form 4 July 06, 201	6										
•									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check th if no lon subject t Section Form 4 c	ger STATE 0 STATE 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								January 31, 2005 verage rs per 0.5	
Form 5 obligatic may con <i>See</i> Instr 1(b).	tinue. Section 1	7(a) of the	Public U	tility Hol		pany	Act of a	Act of 1934, 1935 or Section			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> RUSSELL JOHN G								5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Check	all applicable)	
ONE ENERGY PLAZA			(Month/Day/Year) 07/01/2016				Director Officer (give title Other (specify below) Other (specify below)				
			Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
JACKSON	, 1011 49201]	Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative S	ecuriti	ies Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, any (Month/Day/Year)			n Date, if	Code (Instr. 3, 4 and 5) Year) (Instr. 8) (A)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	07/01/2016			А	2,192 (1)	A	\$0	697,748	D		
Common Stock	07/01/2016			F	16,169	D	\$ 45.63	681,579	D (2)		
Common Stock	07/01/2016			D	210,608 (3)	D	\$0	470,971	D		

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.

Edgar Filing: CMS ENERGY CORP - Form 4

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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
I. S.	Director	10% Owner	Officer	Other			
RUSSELL JOHN G ONE ENERGY PLAZA JACKSON, MI 49201							
Signatures							

Ashley L. Bancroft, Attny-in-Fact

07/06/2016

Date

Signature of Reporting Person **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).
- Grant of 2,192 shares of Restricted Stock pursuant to CMS Energy Corporation's Performance Incentive Stock Plan, and subject to vest at (1)the next annual meeting date.

The total holdings reflect an adjustment of 2,370 additional shares of Restricted Stock purchased on behalf of the reporting person as a (2) 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.

(3) Forfeiture of Restricted Stock due to retirement as President and CEO.

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.