## Edgar Filing: CMS ENERGY CORP - Form 4

CMS ENER	GY CORP										
Form 4											
March 03, 2	016										
									OMB APPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287	
Check th				8	/				Expires:	January 31,	
if no longer STATEMENT OF CHAN				NGES IN BENEFICIAL OWN				ERSHIP OF		mated average len hours per	
subject to STATEMENT OF CHAN Section 16.				SECURITIES							
	Form 4 or								response 0.5		
Form 5	Filed put	rsuant to S	Section 1	6(a) of th	ne Securi	ties I	Exchange	Act of 1934,			
obligatio may con		(a) of the I	Public U	tility Hol	ding Co	npan	y Act of	1935 or Section	1		
See Inst		30(h)	of the Ir	nvestmen	t Compar	ny Ao	ct of 1940	)			
1(b).											
(Print or Type	Responses)										
			2. Issue Symbol					5. Relationship of Reporting Person(s) to Issuer			
-				- ENERGY CORP [CMS]							
(Last)	(First) (	Middle)	3 Date o	f Farliest T	ransaction		-	(Check	all applicable	)	
()	()			e of Earliest Transaction h/Day/Year)				Director 10% Owner			
				01/2016				Officer (give title Other (specify			
							l	below) Senior	below) Vice Presiden	t	
	(64		4 10 4	1		1					
			endment, Date Original				6. Individual or Joint/Group Filing(Check				
			rneu(mo	onth/Day/Yea	r)			Applicable Line) _X_ Form filed by O	ne Reporting Pe	rson	
JACKSON	, MI 49201							Form filed by Me Person			
(City)	(State)	(Zip)	Tah	le I - Non-l	Derivative	Secu		ired, Disposed of,	or Beneficial	ly Owned	
1 77'41 6							_				
1.Title of Security	2. Transaction Date (Month/Day/Year)		ned 3. 4. Securities Acquired (A n Date, if Transaction Disposed of (D) Code (Instr. 3, 4 and 5)					5. Amount of Securities	6. Ownership	7. Nature of Indirect	
(Instr. 3)	(Wolling Duy) Tear)	any						Beneficially	Form:	Beneficial	
		(Month/Da	ay/Year)	(Instr. 8)				Owned	Direct (D)	Ownership	
								Following Reported	or Indirect	(Instr. 4)	
						(A)		Transaction(s)	(I) (Instr. 4)		
				Code V	Amount	or	Derica	(Instr. 3 and 4)			
Common					Amount	(D)	Price \$				
Stock	03/01/2016			S	2,500	D	φ 39.5604	152,970	D (1)		
Stoon							07.0001				

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

## Edgar Filing: CMS ENERGY CORP - Form 4

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Malone Daniel J ONE ENERGY PLAZA JACKSON, MI 49201			Senior Vice President					
Signatures								
Melissa M. Gleespen, Attny-in-Fact		03/03/2016						
**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).

The total holdings reflect an adjustment of 799 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 408

 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.