FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
-------------	------------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-028										
Estimated average burden										
hours per response: 0										

Instruc	ction 1(b).			Filed			Section 16(a) 30(h) of the I						34			у рег теореное.		0.0
Name and Address of Reporting Person* Karuturi Monica						2. Issuer Name and Ticker or Trading Symbol CENTERPOINT ENERGY INC [CNP]								heck all app Direct Office	licable) tor er (give title	ng Person(s) to Iss 10% Ow Other (s		vner
(Last) (First) (Middle) 1111 LOUISIANA					3. Date of Earliest Transaction (Month/Day/Year) 02/15/2022							belov	,	below) neral Counsel				
(Street) HOUST(7002 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Lin	ie) X Form Form	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - No	n-Deriva	tive S	ecui	rities Acq	uired,	Dis	posed of	, or	Bene	eficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,		Transaction Dis		Disposed (4. Securities Acquired (A Disposed Of (D) (Instr. 3 5)			Benefi	ties cially I 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	Transa	ction(s) 3 and 4)			(
Common	ommon Stock 02/15/				2022			A		10,245(1	1)	A	\$0	42,205(2)		D		
		Tal					ies Acqu varrants,								d			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date (Month/Day/Year) if any		on Date,	4. Transaction Code (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)			Amount of Securities		8. Price of Derivative Security (Instr. 5) 8. Price of Derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)		Owners Form: Direct (i or Indirect)	D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

1. Time-based restricted stock units ("RSUs") awarded under the Issuer's Long-Term Incentive Plan (the "Plan") and vesting (i) in February 2025 if the Reporting Person ("R.P.") continues to be an employee of Issuer from the grant date through the vesting date, (ii) in the event of her earlier disability or death, or (iii) on a pro-rata basis upon her earlier retirement unless she satisfies various conditions for full vesting, provided, however, that any such vesting is conditioned upon positive operating income in the last full calendar year of the restricted period except in the case of death or disability.

(D)

(A)

2. Total includes (i) 1,243 RSUs previously awarded under the Plan and vesting in February 2022, (ii) 6,624 RSUs previously awarded under the Plan and vesting in February 2023, and (iii) 11,147 RSUs previously awarded under the Plan and vesting in February 2024. The above awards shall vest (a) if the R.P. continues to be an employee of Issuer from grant date through vesting date and (b) in the event of her disability or death. However, for shares vesting in February 2024, any such vesting is conditioned upon positive operating income in the last full calendar year of the restricted period except in the case of death or disability.

Date

Exercisable

Expiration

Date

Title

Remarks:

Vincent A. Mercaldi, Attorney-in-Fact

02/17/2022

** Signature of Reporting Person

Amount Number

Shares

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).

Code

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.