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McQuistion	Cristina F										
Form 4 March 08, 20)19										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							MISSION	OMB APP OMB Number:	ROVAL 3235-0287 January 31,		
if no long subject to Section 1 Form 4 o Form 5	er STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF 5. SECURITIES								Expires: 2005 Estimated average burden hours per response 0.5		
obligation may cont <i>See</i> Instru 1(b).	ns Section 1	7(a) of the 1	Public U	tility Ho	Iding Compa t Company A	ny A	ct of 193				
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> McQuistion Cristina F			2. Issuer Name and Ticker or Trading Symbol OGE ENERGY CORP. [OGE]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) P.O. BOX 321						Xbelow	Director 10% Owner X Officer (give title Other (specify				
OVI AUON	(Street)	72101		ndment, D nth/Day/Yea	Date Original ar)		Appl _X_	icable Line) Form filed by On	nt/Group Filing(e Reporting Perso re than One Repo	on	
	IA CITY, OK 7						Perso		ľ	C	
(City)	(State)	(Zip)	Tabl	e I - Non-	Derivative Sec	urities	s Acquired	, Disposed of,	or Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Execution any		3. Transact Code (Instr. 8) Code V		(D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s (Instr. 3 and 4	Ownership Form: Direct (D) or Indirect (I) c) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock-\$.01 par value per share	03/06/2019			Ι	7,427.058	D	\$ 42.052	0 (1)	Ι	Retirement Savings	
Common Stock-\$.01 par value per share								19,980	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 (9-02)

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8.] De See (In
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Equiv Units	<u>(2)</u>	03/06/2019		Ι	4,550.394	(3)	(3)	Com Stk	4,550.394	\$

Reporting Owners

Reporting Owner Name / A	ddress	Relationships						
	Director	10% Owner	Officer	Other				
McQuistion Cristina F								
P.O. BOX 321			VP- CIO (OG&E)					
OKLAHOMA CITY, OK 73101								
Signatures								
Patricia D. Horn	03/08/2019							
**Signature of	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 information herein is based on a Retirement Savings Plan Statement dated March 6, 2019. The Retirement Savings Plan Statement indicated the number of shares in the Common Stock Fund of the Retirement Savings Plan credited to the participant's account at March 6, 2019 and includes shares credited since reporting person's last table 1 filing that was exempt from reporting pursuant to Rule

- 16A-3(f)(1)(i)(B).
- (2) Security converts to common stock on a one-for-one basis.
- (3) The Common Stock Units were accrued under the Deferred Compensation Plan of OGE Energy Corp. and are to be settled 100% in cash at a specified future date or following termination of service.

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.

Reporting Person