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Enable Midstream Partners, LP \mathbf{T} 4

| Form 4 November 10, 2014 | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------------------------|-------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|------------------------|--|--|
| November 10, 2014 | | | | | | OMB A | PPROVAL | | |
| FORM 4 UNITED | STATES SE | CURITIES A Washington, | | | E COMMISSION | | 3235-0287 | | |
| Section 16. Form 4 or Form 5 Filed pur | suant to Secti a) of the Publ | IANGES IN I SECUR on 16(a) of the | BENEFI ITIES e Securiti ling Com | CIAL O ies Excha ipany Ac | WNERSHIP OF ange Act of 1934, t of 1935 or Sectio 1940 | Expires: Estimated a burden hou response | irs per | | |
| (Print or Type Responses) | | | | | | | | | |
| 1. Name and Address of Reporting Kind Peter H | Issuer Name and bol ble Midstrean IBL] | | | Issuer | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| (Last) (First) (1 ONE LEADERSHIP SQUA) NORTH ROBINSON AVEN SUITE 950 | Middle) 3. D (Mo RE, 211 11/ | ate of Earliest Trans nth/Day/Year) 07/2014 | ansaction | | X Director Officer (give below) | | 6 Owner er (specify | | |
| (Street) | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | Applicable Line) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| OKLAHOMA CITY, OK 73 | 102 | | | | Form filed by N Person | | | | |
| (City) (State) | (Zip) | Table I - Non-D | erivative S | Securities . | Acquired, Disposed of | f, or Beneficial | llv Owned | | |
| Fitle of curity nstr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. te, if Transactio Code Year) (Instr. 8) | 4. Securi onAcquired Disposed | ties I (A) or I of (D) 4 and 5) (A) or | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Common 11/07/2014 Units | | A | 3,359 | | | D | | | |
| Reminder: Report on a separate line | for each class o | f securities benefi | - | - | or indirectly. spond to the collect | tion of s | SEC 1474 | | |

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)

(9-02)

| 1. Title of Derivative Security (Instr. 3) | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Other

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Reporting Owners

| Reporting Owner Name / Addre | Relationships | | | |
|------------------------------------------------------------------------------------------------|---------------|-----------|--------|--|
| | Director | 10% Owner | Office | |
| Kind Peter H ONE LEADERSHIP SQUARE 211 NORTH ROBINSON AVENUE, OKLAHOMA CITY, OK 73102 | SUITE 950 | Х | | |
| Signatures | | | | |
| /s/ J. Brent Hagy, attorney-in-fact | 11/10/2014 | | | |

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).

Remarks:

Mr. Kind is a director of Enable GP, LLC, the general partner of the Issuer (the "General Partner"). The Issuer is managed by

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.