## Edgar Filing: CLECO CORP - Form 4

CLECO CC	RP											
Form 4												
March 28, 2	.014											
FORM	Λ4		an ar						OMB AF	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMMISSION	OMB	3235-0287			
Check tl	his box		vv a	shington	, D.C. 2	0549			Number:	January 31,		
if no longer			СЦАХ					EDSUID OF	Expires:	2005		
subject t	.0		UNAI	NGES IN BENEFICIAL OWNER SECURITIES				ERSHIP OF	Estimated average			
Section 16. Form 4 or				SECURITIES					burden hours per response 0.5			
Form 5							Exchange	Act of 1934	response	0.5		
obligatio	$\frac{1}{2}$ Section 17(						•	1935 or Section				
may con <i>See</i> Inst	lunue.						ct of 1940					
1(b).	luction				•	•						
(Print or Type	Responses)											
1		D *						5 D. L .'				
				er Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
WILLER J	ODTT		Symbol									
			CLECO CORP [CNL]					(Check all applicable)				
(Last)	(First) (			of Earliest T	ransactior	1						
DO DOV	5000			/Day/Year)				Director 10% Owner X Officer (give title Other (specify				
P.O. BOX 5000 03			03/27/2014					below) below)				
									Sr Vice President			
			4. If Am	nendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mo	Ionth/Day/Year)				Applicable Line)				
		0						_X_ Form filed by Or Form filed by Mo				
PINEVILL	E, LA 71361-500	0						Person		6		
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivativ	e Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transaction Date	2A. Deeme		3.			cquired (A)	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution I		Transactio				Securities	0. Ownership	Indirect		
(Instr. 3)		any		Code (Instr. 3, 4 and 5)				Beneficially	Form:	Beneficial		
		(Month/Day	y/Year)	(Instr. 8)				Owned Following	Direct (D) or Indirect	Ownership (Instr. 4)		
								Reported	(I)	(111301. 4)		
						(A) or		Transaction(s)	(Instr. 4)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common						. ,	¢	36 504 9414				
Stock, \$1	03/27/2014			S	3,597	D	\$ 49.6994	36,504.8414	D			
par							+2.0224	<u> </u>				

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)

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno 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							
	Director	10% Owner	Officer	Other				
MILLER JUDY P P.O. BOX 5000 PINEVILLE, LA 71361-5000			Sr Vice President					
Signatures								
Julia E. Callis, Attorney-in-Fac Miller	/ <b>P</b> .	03/28/2014						
**Signature of Reporting Per	rson		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).

(1) Total includes 32.0019 shares acquired through contributions and/or reinvestment of dividends under the Company's 401(k) plan and 4.1017 shares acquired through the Company's dividend reinvestment plan, both during the period between 2/1/2014 and 3/28/14.

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.