## Edgar Filing: BROOKFIELD INVESTMENT MANAGEMENT INC. - Form 4

BROOKFIE Form 4 March 05, 2	ELD INVESTMEN 018	NT MAN	AGEMI	ENT INC.							
if no lon subject t Section Form 4 o Form 5 obligatio may con	<ul> <li>Continue.</li> <li>Instruction</li> <li>UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549</li> <li>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES</li> <li>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940</li> </ul>							ERSHIP OF Act of 1934, 1935 or Section	OMB Number: Expires: Estimated a burden hour response		
1. Name and Address of Reporting Person *         BROOKFIELD INVESTMENT MANAGEMENT INC.         (Last)       (First)         (Middle)         BROOKFIELD PLACE, 250         VESEY STREET, 15TH FLOOR         (Street)			<ol> <li>Issuer Name and Ticker or Trading Symbol</li> <li>CENTER COAST BROOKFIELD</li> <li>MLP &amp; ENERGY</li> <li>INFRASTRUCTURE FUND [CEN]</li> <li>Date of Earliest Transaction (Month/Day/Year)</li> <li>03/01/2018</li> <li>If Amendment, Date Original</li> </ol>					<ul> <li>5. Relationship of Reporting Person(s) to Issuer</li> <li>(Check all applicable)</li> <li>Director 10% Owner</li> <li>Officer (give titleX Other (specify below)</li> <li>Fund's Adviser</li> <li>6. Individual or Joint/Group Filing(Check</li> </ul>			
				ed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Acqu	iired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		n Date, if	3. Transactio Code (Instr. 8) Code V		ed of (	D)	<ul> <li>5. Amount of Securities</li> <li>Beneficially</li> <li>Owned</li> <li>Following</li> <li>Reported</li> <li>Transaction(s)</li> <li>(Instr. 3 and 4)</li> </ul>	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	03/01/2018			Р	12,234	, í	\$ 9.4662	12,234	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 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 2. 3. Transaction Date 3A. Deemed 5. 6. Date Exercisable and 7. Title and 8. Price of 9. Nt 4. Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date Amount of Derivative Deriv Security or Exercise any Code of (Month/Day/Year) Underlying Security Secu (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Securities (Instr. 5) Derivative Bene (Instr. 3 and 4) Derivative Securities Own Security Acquired Follo (A) or Repo Disposed Trans of (D) (Insti (Instr. 3, 4, and 5) Amount or Date Expiration Title Number Exercisable Date of Shares Code V (A) (D) **Reporting Owners** Relationships

Edgar Filing: BROOKFIELD INVESTMENT MANAGEMENT INC. - Form 4

<b>Reporting Owner Name / Address</b>		Refutionships					
	Director	10% Owner	Officer	Other			
BROOKFIELD INVESTMENT MANAGEMI BROOKFIELD PLACE 250 VESEY STREET, 15TH FLOOR NEW YORK, NY 10281-1023	ENT INC.			Fund's Adviser			
Signatures							
/s/Brookfield Investment Management Inc.	03/05/2018						
**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).

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.