FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washi

washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-		

35-0287 Estimated average burden 0.5 hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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Name and Address of Reporting Person* Horn Patricia D						2. Issuer Name and Ticker or Trading Symbol OGE ENERGY CORP. [OGE]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)							er (give title w)	(give title Other (specify						
(Street) OKLAHO CITY (City)	0		73101 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	S. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - No	on-Deriv	vative	Sec	curitie	s Ac	quired	l, Di	sposed o	f, or E	Benefic	ially	Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Exe) if a	A. Deemed xecution Date, any //onth/Day/Year)		Transaction [Securities Acquired (A) o posed Of (D) (Instr. 3, 4 a			5. Amou Securitie Benefici Owned F Reported	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									v	Amount	(A) o (D)	Price	- 1	Transact (Instr. 3	tion(s)			(Instr. 4)	
Common Stock-\$.01 par value per share 02/20/2				/2018	018			A		739	A	\$00	(1)	43,224.064(2)			D		
Common S	Stock-\$.01	par value per sh	iare	02/21/	/2018				F		257	D	\$31	31.3 42,967.064 D		D			
Common Stock-\$.01 par value per share													5,3		5,292.881 ⁽³⁾			Retirement Savings	
		Ta	able II -								osed of, convertib				wned				
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year		4. Transa Code (8)				6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)	rivative curity	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						
Stock Equiv	(4)								(4)		(4)	Com Stk	(4)			13.237 ⁽	(2)	D	

Explanation of Responses:

- 1. Settlement of performance units upon determination by compensation committee that specified performance goals have been achieved for the three-year period ending December 31, 2017.
- 2. The total includes shares acquired through the reinvestment of dividends that were exempt from reporting pursuant to Rule 16a-11.
- 3. The information herein is based on a Retirement Savings Plan Statement dated February 21, 2018. The Retirement Savings Plan Statement indicated the number of units in the Common Stock Fund of the Retirement Savings Plan credited to the participant's account at February 21, 2018 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). The number of shares of common stock owned at February 21, 2018, was determined by dividing the dollar value of such units by the closing sale price of the common stock on February 21,
- 4. Not Applicable

Remarks:

Patricia D. Horn ** Signature of Reporting Person 02/22/2018

Date

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).

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.