FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB Number 3235-0104

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or section s	o(ii) of the lilv	estment Company Act of 1940					
Name and Address of Reporting Person*     Walker Cynthia Lynn				Date of Event Requiring Statement onth/Day/Year) //11/2018			3. Issuer Name and Ticker or Trading Symbol SEMPRA ENERGY [ SRE ]					
(Last) 488 8TH AVENUE	(First)	(Middle)				Relationship of Reporting Person(s) to Issuer (Check all applicable)				5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street)						X	Director Officer (give title below)	10% Owner Other (specify b	elow)	X Form filed by On	Filing (Check Applicable Line) e Reporting Person	
SAN DIEGO	CA	92101								Form filed by Mo	re than One Reporting Person	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					2. Amount of (Instr. 4)	Securities Beneficially Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
No securities beneficially owned						0	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)					(Instr. 4) Exercise P of Derivati		4. Conversio Exercise Pric of Derivative		6. Nature of Indirect Beneficial Ownership (Instr. 5)			
				Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Security			

Explanation of Responses:

Remarks:

CYNTHIA LYNN WALKER BY: James M.

10/15/2018 Spira, Associate General Counsel of Sempra Energy and Attorney-in-Fact

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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\*If the form is filed by more than one reporting person, see Instruction 5 (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.

POWER OF ATTORNEY

The undersigned hereby constitutes and appoints each of Maria Angelica Espinosa, Lenin E. Lopez, Kari E. McCulloch, G. Joyce Rowland and James M. Spira, or ar (1) Prepare, execute, acknowledge, deliver and file for and on behalf of the undersigned any and all forms, statements and reports (including, but not limited to, Fc (2) Prepare, execute, acknowledge, deliver and file for and on behalf of the undersigned any and all Form 144s (including any amendments or supplements thereto) with (3) Perform any and all acts in connection with the foregoing for and on behalf of the undersigned as the attorney-in-fact so acting may deem necessary or desirable (4) Take any and all other action of any type whatsoever in connection with the foregoing which, in the opinion of the attorney-in-fact so acting, may be of benefit The undersigned grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, or the undersigned acknowledges that the foregoing attorneys-in-fact, in serving in such capacity at the request of the undersigned, are not assuming nor does Station power of attorney shall supersede any power of attorney previously granted by the undersigned with respect to the subject matter herein and shall remain IN WITNESS WHEREOF, the undersigned has caused this power of attorney to be executed as of this 12 day of October, 2018.

/s/ CYNTHIA L. WALKER (Signature) Cynthia L. Walker