FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | |
| Estimated average b | urden | | | | | | | | |

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

| 1. Name and Address of Reporting Person* | | | | | 2. Issuer Name and Ticker or Trading Symbol SEMPRA ENERGY [SRE] | | | | | | | | | | neck all app Direct | tor | g Pers | 10% O | wner |
|---|---|--|--|---------|---|---|---------|---------|---|-------------------------------------|-----------|---|----------------|---|---|---|---|---------------------------------------|---|
| (Last) 101 ASH | Last) (First) (Middle) 01 ASH ST. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2004 | | | | | | | | | ^ below | er (give title Other (specify below) Executive V.P. and C.F.O. | | | specify |
| (Street) SAN DIEGO 92101 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Lin | . Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | Perso | on | | | |
| | | Tab | le I - Non- | -Deriva | ative | Se | curitie | es Ac | quired, | Dis | osed | of, or B | ene | ficia | lly Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution | | on Date | Code (I | Transaction Dispose Code (Instr. 5) | | rities Acquired (A) ed Of (D) (Instr. 3, | | | Benefic | ies cially Following | Form: | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | t (A) or (D) | | Price | Transa | ansaction(s) estr. 3 and 4) | | | |
| | | Т | able II - D (e | | | | | | uired, Di s, option | | | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution D if any (Month/Day) | Date, T | 4. Transactic Code (Inst | | | | 6. Date Exe Expiration (Month/Day | Date | Amount of | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | / [C | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | opiration | Title | or Nu of | nount imber ares | | | | | |
| Phantom Shares ⁽¹⁾ | \$0 ⁽²⁾ | 03/15/2004 | | | A | | 94 | | (3) | | (4) | Common Stock | | 94 | \$31.72 | 58,632 | | D | |

Explanation of Responses:

- 1. Phantom shares of Sempra Energy Common Stock acquired under Sempra Energy multi-fund deferred compensation and excess savings plans. Total includes any additional shares accrued as dividend equivalents since the date of the last report of phantom share acquisitions. Plan payouts are in cash and limited intra-plan transfers are permitted based on the then market value of the shares of Sempra Energy Common Stock to which the phantom shares relate.
- 2. Conversion of Derivative Security is 1 for 1.
- 3. Date Exercisable is Immediate.
- 4. Expiration date is Not Applicable.

Remarks:

NEAL E. SCHMALE G. Joyce Rowland, Senior VP of Sempra 03/16/2004 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.

- * 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.