SEC Form 4
------------

FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL

OMB Number:	3235-0287
Estimated average but	rden
hours per response:	0.5

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

					/counci	11 0011	ipany Act of 10	-+0				
1. Name and Address of Reporting Person* <u>Campbell June C</u>				Issuer Name <b>and</b> Ticker CWEN FINANC					tionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner Officer (give title Other (specify			
(Last) 1661 WORTHII	(First) NGTON ROA	(Middle) D, SUITE 100		3. Date of Earliest Transaction (Month/Day/Year) 03/30/2020						below) EVP & Chief	below	)
(Street) WEST PALM BEACH	FL	33409	4.	lf Amendment, Date of C	Driginal	Filed (	(Month/Day/Ye	ar)	6. Indi Line) X	vidual or Joint/Grou Form filed by On Form filed by Mo Person	e Reporting Pers	on
(City)	(State)	(Zip)										
		Table I - No	n-Derivativ	e Securities Acqu	uired,	Disp	oosed of, o	r Bene	ficially	Owned		
Dat		2. Transactior Date (Month/Day/Y	Execution Date,		Transaction Code (Instr. 3, 4 B)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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. Transa Code ( 8)		5. Number Derivative Securities Acquired or Dispo of (D) (In 3, 4 and	re es I (A) sed str.	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	e Ownership Form: Ally Direct (D) or Indirect g (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Restricted Stock Units	(1)	03/30/2020		Α		190,000		(2)	(3)	Common Stock	190,000	\$0	190,000	D	
Restricted Stock Units	(1)	03/30/2020		A		190,000		(4)	(3)	Common Stock	190,000	\$0	190,000	D	

Explanation of Responses:

1. Each Restricted Stock Unit represents a contingent right to receive a cash payment equal to the closing price of one share of OCN common stock on the applicable vesting date.

2. On March 30, 2020, the reporting person was granted 190,000 restricted stock units subject to both a performance-based condition and a time-based vesting schedule. The target number of units subject to the award is reported above. Between 0% and 200% of the target number of units will be eligible to vest on March 30, 2023 based on the relative ranking of the Issuer's absolute total shareholder return compared to the absolute total shareholder return of companies within the Issuer's pre-established peer group at designated measurement periods.

3. Not applicable.

4. On March 30, 2020, the reporting person was granted 190,000 restricted stock units scheduled to vest in three approximately equal annual installments on the first, second and third anniversaries of grant.

/s/ Michael J. Stanton,
Attorney-in-Fact for June C.
Campbell

\*\* Signature of Reporting Person Date

04/01/2020

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

 $\ast$  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.