Frey John C Form 4 August 17, 2018

### FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB** Number:

**OMB APPROVAL** 

Washington, D.C. 20549

3235-0287 January 31,

if no longer subject to Section 16. Form 4 or

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

2005 Estimated average burden hours per response... 0.5

> 10% Owner Other (specify

Expires:

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

Frey John C

2. Issuer Name and Ticker or Trading

Symbol

KAYNE ANDERSON

MIDSTREAM/ENERGY FUND,

INC. [KMF]

(Last) (First) (Middle)

3. Date of Earliest Transaction

(Month/Day/Year) 08/06/2018

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

C/O KAYNE ANDERSON

CAPITAL ADVISORS LP, 1800 AVENUE OF THE STARS, THIRD

**FLOOR** 

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

below) EVP, ASST. SEC. & TREAS

6. Individual or Joint/Group Filing(Check

Applicable Line)

Director

X\_ Officer (give title

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

LOS ANGELES, CA 90067

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

4. Securities Acquired Reported

5. Amount of Securities Ownership Beneficially Form: Owned Direct (D) Following or Indirect

(I)

7. Nature of Indirect Beneficial Ownership (Instr. 4)

(A) Amount

or (D) Price Transaction(s) (Instr. 4)

(Instr. 3 and 4)

**COMMON STOCK** 

08/06/2018

V 60,957

Code V

125,618 15.1

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.

SEC 1474 (9-02)

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### Edgar Filing: Frey John C - Form 4

### 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	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate	Amount of		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative				Securities		(Instr. 5)	Bene
	Derivative				Securities Acquired (A) or			(Instr. 3	and 4)		Own
	Security										Follo
	•										Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3, 4, and 5)						
								Λ.	mount		
									mount		
						Date	Expiration Date	Title N	r Jumber		
						Exercisable		Title Numb			
				C + V	(A) (D)						
			Code V (A) (D)					S	hares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other

Frey John C C/O KAYNE ANDERSON CAPITAL ADVISORS LP 1800 AVENUE OF THE STARS, THIRD FLOOR LOS ANGELES, CA 90067

EVP, ASST. SEC. & TREAS

# **Signatures**

/S/ DAVID SHLADOVSKY BY POWER OF **ATTORNEY** 

08/13/2018

\*\*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).

SHARES RECEIVED IN EXCHANGE FOR SHARES FORMERLY HELD IN KAYNE ANDERSON ENERGY TOTAL RETURN (1) FUND, INC. IN CONNECTION WITH ITS REORGANIZATION INTO KMF, USING RESPECTIVE NET ASSET VALUES PER SHARE.

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.

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