FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| Check this box if no longer subject to | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|--|--|
| 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 |

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Sotos Christopher S (Last) (First) (Middle) CLEARWAY ENERGY, INC. 300 CARNEGIE CENTER, SUITE 300 | | | | | 2. Issuer Name and Ticker or Trading Symbol Clearway Energy, Inc. [CWEN] | | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|---|-------|-------|-----------------------------|----------------------------|--|---|------------|---|---------|------------------|---|--------|---------------------------------------|---|--|---|--|------------|-----------------------|--|
| | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/03/2019 | | | | | | | | | X | Office below | , | | Other (specify below) | |
| (Street) PRINCE (City) | TON N | J | 08540 (Zip) | | 4. If | Line) | | | | | | | | | | | | | | |
| | | Tab | le I - Non | -Deriv | ative | Sec | curitie | s Acc | quired, | Disp | osed o | of, or | Ben | eficia | ally C | Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | Execut Day/Year) if any | | A. Deemed xecution Date, any Month/Day/Year) | | 3. 4. Securities Acquired (Disposed Of (D) (Instr. 3) 5) | | (A) oı 3, 4 a | 4 and Se | | unt of ties cially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | | |
| | | | | | | | | | Code | v | Amount (A) or (D) | | Price | . - | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | | |
| Class C Common Stock, par value \$.01 per share | | | | 06/03 | 03/2019 | | | | A | | 2,581 | 1 A | | (1 | 130,694(2) | | D | | | |
| | | Ta | able II - D | | | | | | | | sed of, onvertib | | | | y Ow | ned | | , | • | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security Security 3. Transaction Date (Month/Day/Year) if any (Month/Day/ | | Date, | Transaction Code (Instr. 8) | | 5. Number of Eprivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration | Date Expiration Expiration Date Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | ivative curity | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

- 1. Represents dividend equivalent rights accrued on the Reporting Person's Restricted Stock Units ("RSUs") and Relative Performance Stock Units ("RPSUs"), which become exercisable proportionately with the RSUs and RPSUs to which they relate and may only be settled in Class C Common Stock of Clearway Energy, Inc. as determined by the RSU or RPSU to which they relate.
- 2. Includes 15,808 dividend equivalent rights that may only be settled in Class C Common Stock.

/s/ Michael A. Brown, by Power of Attorney

06/05/2019

** 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.