FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPR | OVAL | | | | |
|-----------------------|-----------|--|--|--|--|
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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* <u>HOUSEHOLDER JOSEPH A</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol SEMPRA ENERGY [SRE] | | | | | | | | | ck all appl Direct | or | g Perso | 10% Ov | vner |
|--|--|--|--|---------|---|---|---------|------|--|---|-----------|---|--------------------------------|--------|--|--|--|---------------------------------|--|
| (Last) (First) (Middle) 101 ASH STREET | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/24/2009 | | | | | | | | X | below | | | Other (s below) ontroller | вреспу |
| (Street) SAN DIEGO CA 92101 (City) (State) (Zip) | | | | | 4. li | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line) | Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tab | le I - Non | n-Deriv | ative | Se | curitie | es A | cquired, | Dis | osed | of, or Be | enefi | cially | / Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date, | | | Code (| Transaction Code (Instr. 8) Disposed Of (D) (Instr. 5) | | | str. 3, | | Securiti Benefic Owned Reporte | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | t (A) or P | | rice | (Instr. 3 | | | | |
| | 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. Deeme Execution if any (Month/Day | Date, | 4. Transaction Code (Instr. B) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | S | Price of erivative ecurity estr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owner Form: Direct or Indi (I) (Inst | Ownership | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisabl | | opiration | Title | Amo or Num of Shar | ber | | | | | |
| Phantom Shares ⁽¹⁾ | (2) | 04/24/2009 | | | A | | 11 | | (3) | | (4) | Common Stock | 11 | | \$44.94 | 3,044 | | 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:

JOSEPH A. HOUSEHOLDER
BY: G. Joyce Rowland, Senior
04/27/2009

VP of Sempra Energy and

Attorney-In-Fact

** Signature of Reporting Person

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.