## Shea William H JR Form 3 August 15, 2018 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB Number:

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and A Person <u>*</u> Shea Wit		porting	2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol KAYNE ANDERSON MIDSTREAM/ENERGY FUND, INC. [KMF]					
(Last)	(First)	(Middle)	06/28/2018		4. Relationship Person(s) to Is			5. If Amendment, Date Original Filed(Month/Day/Year)		
811 MAIN	STREET, 1	l4TH								
FLOOR				(Check all applicable)						
HOUSTON	(Street)	7002			XDirector10% Owner OfficerOther (give title below) (specify below)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Tal	ole I - N	on-Derivati	ive Securiti	es Bei			
1.Title of Security (Instr. 4)			Ben	amount of eficially ( tr. 4)	Securities Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owner (Instr.	rship	rect Beneficial	
Reminder: Rep owned directly			ch class of securities	s benefici	ally SI	EC 1473 (7-02	)			
	inforr requi	nation conta red to respo	oond to the collec ained in this form nd unless the for MB control numbe	are not m displa	ays a					
r	Fable II - De	rivative Secu	rities Beneficially O	wned (e.	g., puts, calls,	warrants, opt	ions, co	onvertible	securities)	
1. Title of Der (Instr. 4)	ivative Securi	Expir	te Exercisable and ration Date /Day/Year)	Securitie	and Amount of es Underlying ve Security	4. Conversio		vnership rm of	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

(Instr. 4)

Expiration Title

Date

Date

Exercisable

Price of

Security

Amount or

Number of

Shares

Derivative

Derivative Security:

Direct (D)

or Indirect

3235-0104

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

(I) (Instr. 5)

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships										
		ector	10% Owner	Officer	Other						
Shea William H JR 811 MAIN STREET, 14TH FLOOR HOUSTON, TX 77002	Â	X	Â	Â	Â						
Signatures											
/S/ DAVID SHLADOVSKY BY POW ATTORNEY	0	7/31/2018									
**Signature of Reporting Perso	Date										
Explanation of Responses:											

## No securities are beneficially owned

\* If the form is filed by more than one reporting person, *see* Instruction 5(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. 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.