## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	pe Responses	-)												
1. Name and Address of Reporting Person * Fulmer Jeffrey E.			2. Issuer Name and Ticker or Trading Symbol CorEnergy Infrastructure Trust, Inc. [CORR]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) (First) (Middle) 1100 WALNUT, SUITE 3350			3. Date of Earliest Transaction (Month/Day/Year) 01/10/2019					X Officer (give title below) Other (specify below)  Executive Vice President						
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
KANSA	S CITY, M	IO 64106								Form me	ed by More man	One Reporting	erson	
(City	r)	(State)	(Zip)	Ta	ble I - N	n-Dei	rivative S	Securitie	s Acqu	ired, Disp	osed of, or I	Beneficially (	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	•	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Beneficially Owned Following Reported Transaction(s)		Following	Ownership Form:	Beneficial	
				(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	and 4)			Ownership (Instr. 4)
Commor	Stock		01/10/2019		P		800	A	\$ 34.69	4,865			D	
		1	r cucii ciuss oi secu	rities beneficially ov	vned dire	Pers	sons wh tained ir	o respo	orm ar	e not requ		spond unle	ss	1474 (9-02)
			Table II -	Derivative Securit	ies Acqui	Pers cont the t	sons wh tained ir form dis	o responding this for splays a	orm are a curre	e not requently valid	uired to res OMB cont		ss	1474 (9-02)

#### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Fulmer Jeffrey E. 1100 WALNUT, SUITE 3350 KANSAS CITY, MO 64106			Executive Vice President		

### **Signatures**

/s/ Jeffrey E. Fulmer	01/14/2019	
**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).

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.