FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
bligations may continue. See
netruction 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPR	OVAL							
	OMB Number:	3235-0287							
Estimated average burden									
ı	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* GOODPASTURE JOHN N							2. Issuer Name and Ticker or Trading Symbol TEPPCO PARTNERS LP [TPP]									eck all applic Directo	or		10% Owner				
(Last) 1100 LO	(Last) (First) (Middle) 1100 LOUISIANA STREET, SUITE 1600						3. Date of Earliest Transaction (Month/Day/Year) 05/11/2009									X Officer (give title Other (specibelow) Vice President				specify			
(Street) HOUSTON TX 77002					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S		(Zip)	Dorive	ativ.	. 50	ourition	. ^ ^	quiro	1 D	icn	osod o	of or E	Pono	ficiall	v Owned							
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned Title of Security (Instr. 3) 2. Transaction 3.																						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Da			e, Tra Co	nsact le (Ins	ion Dispose		ities Acc d Of (D)	luired ((A) or 3, 4 and	Securitie Benefici Owned F	es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	of Indirect Beneficial Ownership			
								Cod	le \	′	Amount	Amount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
)9			A			5,400	0	A	\$0 ⁽¹⁾	13,800(2)			D				
	Common Units Representing Limited 05/11/2009 A 5,400 A \$0(1) 13,800(2) D Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) L. Title of 2. 3. Transaction 3A. Deemed 4. 5. Number 6. Date Exercisable and 7. Title and Amount 8. Price of 9. Number of 10. 11. Nature																						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\)	ate, Ti	ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea				7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e Constant of the constant of	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				С	ode	v	(A)	(D)	Date Exercis	able	Ex Da	piration ite	Title	or Nu of	umber								
Employee Unit Options - Right To Buy (#006-23)	\$28.81	05/11/2009			A		25,000		05/11/2	2013	12	/31/2014	Comm Units		5,000	\$0	25,000	0	D ⁽³⁾				

Explanation of Responses:

- 1. No consideration.
- 2. Includes common units granted to the Reporting Person that have restricted vesting dates and are subject to forfeiture.
- 3. The power of attorney under which this form was signed is on file with the Commission.

Remarks:

William L. Soula, Agent and Attorney in Fact on behalf of John N. Goodpasture

05/13/2009

** 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.