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
obligations may continue. See
Instruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Weitzel Harry					2. Issuer Name and Ticker or Trading Symbol ENTERPRISE PRODUCTS PARTNERS L P [EPD]								tionship o all applic Directo	able)	ng Person(s) to Issuer				
	st) (First) (Middle) 00 LOUISIANA STREET ITE 1000					3. Date of Earliest Transaction (Month/Day/Year) 08/03/2017							X Officer (give title below) Other (specify below) SVP, General Counsel & Sec						
(Street) HOUST(ate)	77002 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							Line) X	X Form filed by One Reporting Person Form filed by More than One Reporting Person						
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Transaction	2A. Deemed Execution Date,		3. Transactic Code (Ins 8)	tr. 5)			or and	5. Amount of Securities Beneficially Owned Follo Reported		Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
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. Deemed Execution Date if any (Month/Day/Ye	ate, Transaction Code (Instr		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		of Secu Underly Derivat	7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		Price of erivative ecurity nstr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
				Code	e V	(A)	(D)	Date Exercisable	Expiration Date	on Title	Amo or Num of Shar	ber							
Phantom Units	(1)							(2)	(2)	Commo	n 11,0	000		11,000)	D			
Phantom Units	(1)							(3)	(3)	Commo	ⁿ 24,3	375		24,375	5	D			
Phantom Units	(1)							(4)	(4)	Commo	ⁿ 26,5	500		26,500)	D			
Phantom Units	(1)	08/03/2017		A		10,000		(5)	(5)	Commo	n 10,0	000	\$0.00	10,000)	D ⁽⁶⁾			

Explanation of Responses:

- 1. Each phantom unit is the economic equivalent of one Enterprise Products Partners L.P. ("EPD") common unit.
- 2. These phantom units vest in two remaining equal annual installments beginning on January 5, 2018. Each remaining annual installment will expire upon vesting and settlement thereof in exchange for an equal number of EPD common units.
- 3. These phantom units vest in three remaining equal annual installments beginning on February 16, 2018. Each remaining annual installment will expire upon vesting and settlement thereof in exchange for an equal number of EPD common units.
- 4. These phantom units vest in four equal annual installments beginning on February 16, 2018. Each annual installment will expire upon vesting and settlement thereof in exchange for an equal number of EPD
- 5. These phantom units vest on August 3, 2021. These phantom units will expire upon vesting and settlement thereof in exchange for an equal number of EPD common units.
- 6. The power of attorney under which this form was signed is on file with the Commission.

Remarks:

Transaction Code A - Grant, award or other acquisition pursuant to Rule 16b-3(d)

/s/Wendi S. Bickett, Attorney-

in-Fact on behalf of Harry P.

08/07/2017

Weitzel

** 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.