# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

# 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*  Bulawa Bryan F.					EI	2. Issuer Name and Ticker or Trading Symbol  ENTERPRISE PRODUCTS PARTNERS L  P [ EPD ]									cable) or r (give title	g Pers	10% Ow Other (s	ner	
(Last) (First) (Middle) 1100 LOUISIANA STREET SUITE 1000						3. Date of Earliest Transaction (Month/Day/Year) 11/16/2015								below	SVP & Chief Financial Officer				
(Street) HOUSTON TX 77002					_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								e) X Form Form	Form filed by One Reporting Person  Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)											. 0.00					
			le I - No			_			<del>-</del>	, Dis	1			ly Owned		I a a		7. Nature	
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ar) l	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Benefic Owned	es ially Following	Form (D) or	orm: Direct	of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)				
Common Units Representing Limited Partnership Interests				11/1	1/16/2015				M <sup>(1)</sup>		10,000	0 A	\$16.1	35 12	125,574		D		
Common Units Representing Limited Partnership Interests				11/1	6/201	/2015		F <sup>(2)</sup>		7,690	D	\$26.	8 11	117,884		D			
		-	Table II -								osed of, converti			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year		4. Transactio Code (Inst 8)				6. Date Exercisable a Expiration Date (Month/Day/Year)		е	nnd 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Employee Unit Option- Right To Buy	\$16.135	11/16/2015			M <sup>(1)</sup>			10,000	02/01/20	)15	12/31/2015	Common Units	10,000	\$0.00	0		D <sup>(3)</sup>		

### **Explanation of Responses:**

- 1. Represents the exercise of employee unit options that vested in 2014, first became exercisable on February 1, 2015 and terminate on December 31, 2015 (to the extent not previously exercised). In accordance with the terms and conditions applicable to such awards, employee unit options granted by the issuer may only be exercised at certain times during the calendar year (typically the months of February, May,
- 2. Represents the payment (by delivering or withholding common units) of the exercise price and/or tax liability incident to the exercise of the employee unit options described in Footnote 1 above.
- 3. The power of attorney under which this form was signed is on file with the Commission.

#### Remarks:

Transaction Code M - Exercise or conversion of derivative security exempted pursuant to Rule 16b-3; Transaction Code F - Payment of exercise price or tax liability by delivering or withholding securities incident to the receipt, exercise or vesting of a security issued in accordance with Rule 16b-3

/s/Wendi S. Bickett, Attorney-

11/17/2015 in-Fact on behalf of Bryan F.

Bulawa

\*\* 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.