### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL |
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|              |

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

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

|  |   |      |             |  | · · · |  | . 00(11)  | OI tile |   | ilonic C | ompany 7 tot   | 01 10-10  |                        |  |   |  |  |   |   |           |  |
|--|---|------|-------------|--|-------|--|---|---------|---|----------|--|---|------------------------|--|---|--|--|---|---|-----------|--|
| 1. Name and Address of Reporting Person*  Zulim Thomas M.        |   |      |             |  |       | 2. Issuer Name and Ticker or Trading Symbol ENTERPRISE PRODUCTS PARTNERS L P [ EPD ] |   |         |   |          |  |   |                        |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  Director  Officer (give title  Director  Director  Other (specification) |  |  |   |   |           |  |
| (Last) (First) (Middle)<br>1100 LOUISIANA STREET<br>SUITE 1000   |   |      |             |  |       | 3. Date of Earliest Transaction (Month/Day/Year) 05/06/2013                          |   |         |   |          |  |   |                        | A below) below)  Group Senior Vice President |   |  |  |   |   |           |  |
| (Street) HOUSTON TX 77002  |   |      |             |  | 4. If | Line   |   |         |   |          |  |   |                        |  |   | Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |  |   |   |           |  |
| (City)   | (St   | ate) | (Zip)       |  |       |  |   |         |   |          |  |   |                        |  |   |  |  |   |   | _         |  |
|  |   |      | ole I - N   |  |       |  |   |         | -   | d, D     | isposed o  |   |                        | ial  | _   |  |  |   |   | $\exists$ |  |
|  |   |      |             | 2. Transaction<br>Date<br>(Month/Day/Year) |       |  |   |         | 3.<br>Transaction<br>Code (Instr.<br>8)     |          | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5) |   |                        |  |   | i<br>lly   | Form:                                  | Direct<br>Indirect<br>tr. 4)                                      | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |           |  |
|  |   |      |             |  |       |  |   |         | Code  | v        | Amount   | (A) or<br>(D)   | Price                  |  | Transactio<br>(Instr. 3 a   |  |  |   | (IIISU: 4 <i>)</i>                                    |           |  |
| Common Units Representing Limited Partnership Interests 05/06/20 |   |      |             |  | 013   | 13   |   |         | F   |          | 5,454  | D   | \$60.6                 | 64   | 315,441   |  |  | D   |   |           |  |
| Common Units Representing Limited Partnership Interests          |   |      |             |  |       |  |   |         |   |          |  |   |                        | 30   | 0   |  | I                                      | By daught   | er  |           |  |
| Common Units Representing Limited Partnership Interests          |   |      |             |  |       |  |   |         |   |          |  |   | 350                    |  | 0   |  |  | By<br>grandchild  |   |           |  |
| Common Units Representing Limited<br>Partnership Interests       |   |      |             |  |       |  |   |         |   |          |  |   |                        | 35   | 0   |  |  | By<br>grandchild  |   |           |  |
| Common Units Representing Limited Partnership Interests          |   |      |             |  |       |  |   |         |   |          |  |   |                        | 300  |   | I  |  | By<br>grandchild  | (1)   |           |  |
|  |   | T    | able II     |  |       |  |   |         |   |          | oosed of,<br>convertib   |   |                        |  | Owned   |  |  |   |   |           |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)              | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security |      | Execuif any |  |       | action<br>(Instr.  | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |         | 6. Date Exer<br>Expiration D<br>(Month/Day/ |          | ate  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                        | 3  | b. Price of<br>Derivative<br>Decurity<br>Instr. 5)  | 9. Numb<br>derivativ<br>Securitie<br>Benefici<br>Owned<br>Followin<br>Reporter<br>Transact<br>(Instr. 4)                                   | ve<br>es<br>ally<br>ig<br>d<br>tion(s) | 10.<br>Ownersh<br>Form:<br>Direct (D<br>or Indirec<br>(I) (Instr. | Beneficia<br>Ownersh<br>t (Instr. 4)                  | ct<br>al  |  |
|  |   |      |             |  |       | v  | (A)   | (D)     | Date<br>Exerci                              | isable   | Expiration<br>Date   | Title   | Number<br>of<br>Shares |  |   |  |  |   |   |           |  |

## **Explanation of Responses:**

1. The power of attorney under which this form was signed is on file with the Commission.

#### Remarks:

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, Attorneyin-Fact on behalf of Thomas

M. Zulim

\*\* Signature of Reporting Person

05/08/2013 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.