FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235		

OMB Number:	3235-0287
Estimated averag	e burden
hours per respons	se: 0.5

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

1. Name and Address of Reporting Person* Bacon Graham W.					EN	2. Issuer Name and Ticker or Trading Symbol ENTERPRISE PRODUCTS PARTNERS L P [EPD]									5. Relationship of Reporti (Check all applicable) Director Officer (give title			10% Ov	wner		
	ast) (First) (Middle) 00 LOUISIANA STREET UITE 1000					3. Date of Earliest Transaction (Month/Day/Year) 02/19/2015										A below) below) Group Senior Vice President					
(Street) HOUST(77002 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	e) X Form : Form :	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tab	le I - No	n-Deriv	ative	Se	curiti	ies Ac	quired	, Dis	posed	of, or	Bene	ficial	y Owned	t					
			2. Transaction Date (Month/Day/Year)		ar) Ē	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (In						5. Amou Securiti Benefic Owned Reporte	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A (D) or	Price	Transac (Instr. 3	tion(s)			(11150.4)			
	Units Repr ip Interests	resenting Limited	i	02/19)/2015	5			М		8,00	0	A	(1)	154,808 D						
Common Units Representing Limited Partnership Interests			02/19	19/2015				F		6,60	8	D	\$33.7	148,200			D				
		7	able II -								osed of convert				Owned		,				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)				6. Date E Expiratio (Month/I	n Dat		7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e (C S I Illy I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisa		Expiration Date	Title	or Nu of	ımber							
Phantom Units	(1)	02/19/2015			M			8,000	(2)		(2)	Comm		,000	\$0.00	24,000		D			
Phantom	(1)								(3)		(3)	Comm	on 30	0.000		30.000)	D ⁽⁴⁾			

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 four equal annual installments beginning on February 19, 2015. Each annual installment will expire upon vesting and settlement thereof in exchange for an equal number of EPD
- 3. These phantom units vest in four equal annual installments beginning on February 18, 2016. Each annual installment will expire upon vesting and settlement thereof in exchange for an equal number of EPD
- 4. 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-02/23/2015 in-Fact on behalf of Graham W. Bacon

** 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.