FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL | | | | | |
|---|------------------------|-----------|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | |
| l | Estimated average burd | en | | | | | |
| l | hours per response: | 0.5 | | | | | |

| | Check this box if no longer subject to | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|
| ٦ | 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

| | | | | | 01 0 | JCCIII | 011 30(11 |) or tire | IIIVC | Suncin | COII | ipariy Act | 01 13 | 7-0 | | | | | | | | |
|--|---|--|------------------|-------------------------------|--|---|---|-----------|-------|---------------------------------|--------|--|---|--------------|----------------------|---|---|---|---|---|--|--|
| 1. Name and Address of Reporting Person [*] BOURDON LYNN L III | | | | | 2. Issuer Name and Ticker or Trading Symbol ENTERPRISE PRODUCTS PARTNERS L | | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | |
| (Last) | (Last) (First) (Middle) | | | | | <u>P</u> [EPD] | | | | | | | | | | | Offic belov | | | | specify | |
| 1100 LOUISIANA STREET SUITE 1000 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/03/2010 | | | | | | | | | | | Senior Vice President | | | | | |
| (Street) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | | dividual or Joint/Group Filing (Check Applicable) | | | | | |
| (Street) HOUSTON TX 77002 | | | | | | | | | | | | | | | | X | Form filed by More than One Reporting | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | | Person | | | | |
| | | Tab | le I - Noi | n-Deriv | ative | Se | curiti | es Ac | qui | red, | Disp | osed o | f, o | r Be | enefic | cially | Owne | ed | | | | |
| Date | | | | 2. Transa Date (Month/D | | ur) I | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. Fransac Code (II 3) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | 4 and Secui Benef Owne | | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | c | Code | v | Amount | | (A) o (D) | r Pri | се | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Units Representing Limited Partnership Interests 05/03/ | | | | | /2010 | 010 | | | | F | | 2,381 D | | \$3 | 35.61 | 86,304 | | | D | | | |
| Common Units Representing Limited Partnership Interests | | | | | | | | | | | | | | | | 300 | | | I | By son | | |
| Common Units Representing Limited Partnership Interests | | | | | | | | | | | | | | | | 300 | | | I ⁽¹⁾ | By son | | |
| | | Ta | able II - I (| | | | | | | | | sed of, onvertib | | | | | wned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | ecution Date, | | ction Instr. | n of l | | | Date Ex piration onth/Da | n Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | of es ng re | Der Sec (Ins | vative ırity r. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Or Fo Di or (I) | D. wnership orm: irect (D) r Indirect) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | | | | Expiration Date | or Num of | | Numbe | | | | | | | |

Explanation of Responses:

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

Remarks:

/s/Wendi S. Bickett, Attorney-

in-Fact on behalf of Lynn L.

Bourdon, III

<u>ynn L.</u> <u>05/05/2010</u>

Date

** Signature of Reporting Person

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

- * 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.