FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APP | ROVAL |
|-------------|--------|
| OMD Numbers | 2225.0 |

OMB Number: Estimated average burden hours per response: 0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| Name and Address of Reporting Person* Murray Craig W. | | | | | EN | 2. Issuer Name and Ticker or Trading Symbol ENTERPRISE PRODUCTS PARTNERS L P [EPD] | | | | | | | | | (Che | ck all applic | able) | g Pers | on(s) to Iss 10% Ov Other (s | vner | | |
|---|--|--|--|--|----------------------------|---|---|-------|--|-------------------------------------|-------|---|------------------|-------------|---|---|---|------------|---|------------|--|--|
| (Last) 1100 LO SUITE 1 | UISIANA : | , | (Middle) | | | Date o | f Earliest 015 | Trans | sacti | ion (Mo | nth/D | ay/Year) | | below) | | below) z General Counsel | | ' ´ | | | | |
| (Street) | ON T | X | 77002 | | 4. II | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | n | | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | |
| | | | | 2. Transaction Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | •, | Transaction Dispose Code (Instr. 5) | | rities Acquired (A) o ed Of (D) (Instr. 3, 4 | | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | | Code | v | Amount | () | A) or D) | Price | Transac (Instr. 3 | tion(s) | | | (Instr. 4) | | |
| | Units Repr ip Interests | esenting Limited | l | | | | | | | | | | | | | 56 | ,981 | | D | | | |
| | Units Repr ip Interests | esenting Limited | l | | | | | | | | | | | | | 5 | 07 | I By Trust | | | | |
| | | ٦ | Table II - I | | | | | | | | | sed of, onvertil | | | | Owned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution D if any (Month/Day) | Date, T | ransaction Code (Instr. | | of | | 6. Date Exercisal Expiration Date (Month/Day/Year) | | | of Securities | | ecurity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Owners Form: Direct (or Indir (I) (Inst | Ownership | Beneficial Ownership ct (Instr. 4) | | | |
| | | | | C | Code | v | (A) | (D) | Dat Exe | te ercisabl | | xpiration ate | Title | O N O | umber | | | | | | | |
| Phantom Units | (1) | 01/05/2015 | | | A | | 25,000 | | (2) | | | (2) | Common Units 25, | | 5,000 | \$0.00 | 25,000 | | D ⁽³⁾ | | | |

Explanation of Responses:

- 1. Each phantom unit is the economic equivalent of one EPD common unit.
- 2. These phantom units vest in four equal annual installments beginning January 5, 2016. Each annual installment will expire upon vesting and settlement thereof in exchange for an equal number of EPD common units.
- 3. 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, Attorneyin-Fact on behalf of Craig W.

01/07/2015 **Murray**

** 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.