#### **BACHMANN RICHARD H**

Form 4 May 08, 2013

### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** OMB

Number:

3235-0287

Expires:

January 31, 2005

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obligations

Check this box

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

may continue. See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* **BACHMANN RICHARD H** 

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)

(Last)

(First)

(Middle)

3. Date of Earliest Transaction

(Month/Day/Year)

\_X\_\_ Director 10% Owner Officer (give title

Other (specify

1100 LOUISIANA STREET, SUITE 05/06/2013

1000

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

7,869

I

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

HOUSTON, TX 77002

(City)	(State) (Zip	Table I	- Non-Deri	ivative Sec	curitie	s Acquire	ed, Disposed of, o	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securit or(A) or Di (Instr. 3,	sposed 4 and : (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Units Representing Partnership Interests	05/06/2013		F	15,690		\$ 60.64	638,158.39	D	
Common Units Representing Partnership Interests							7,869	I	By Trust

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By Trust Common (2) Units Representing Partnership Interests Common Units By Representing 2,231 I Spouse (3)Partnership Interests

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

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 control number.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,	<b>.</b>	ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BACHMANN RICHARD H 1100 LOUISIANA STREET SUITE 1000 HOUSTON, TX 77002	X						

# **Signatures**

/s/Wendi S. Bickett, Attorney-in-Fact on behalf of Richard H.

Bachmann

05/08/2013

\*\*Signature of Reporting Person Date

Reporting Owners 2

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### **Explanation of Responses:**

- \* 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).
- (1) These common units are held in a grantor retained annuity trust for the benefit of Mr. Bachmann's daughter. Mr. Bachmann is the trustee and a beneficiary of the trust.
- These common units are held in a grantor retained annuity trust for the benefit of Mr. Bachmann's son. Mr. Bachmann is the trustee and a beneficiary of the trust.
- (3) 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, etc. Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.