#### Edgar Filing: COLLINGSWORTH JAMES M - Form 4

COLLINGSWORTH JAMES M Form 4 November 30, 2009 **OMB APPROVAL** FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading COLLINGSWORTH JAMES M Issuer Symbol ENTERPRISE PRODUCTS (Check all applicable) PARTNERS L P [EPD] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X\_Officer (give title Other (specify (Month/Day/Year) below) below) 1100 LOUISIANA STREEET, 11/25/2009 Senior Vice President **SUITE 1000** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting HOUSTON, TX 77002 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities Acquired (A) 5. Amount of 7. Nature 1.Title of 2. Transaction Date 2A. Deemed 3. 6. Security (Month/Day/Year) Execution Date, if Transaction Disposed of (D) Securities Ownership of Indirect (Instr. 3) anv Code (Instr. 3, 4 and 5) Beneficially Form: Beneficial (Month/Day/Year) Owned Ownership (Instr. 8) Direct (D) Following or Indirect (Instr. 4) Reported  $(\mathbf{I})$ (A) Transaction(s) (Instr. 4) or (Instr. 3 and 4) (D) Code V Amount Price Common Units Representing 11/25/2009 Μ 50,000 A 112.533 D 23 235 Limited Partnership Interests Common 11/25/2009 F \$ 29.94 70.769 D 41.764 D Units Representing Limited Partnership

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Interests							
Common Units Representing Limited Partnership Interests	11/25/2009	М	25,000	A	\$ 20	95,769	D
Common Units Representing Limited Partnership Interests	11/25/2009	F	18,895	D	\$ 29.94	76,874	D

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.

# 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	orDeri Secu Acqu or D (D)	urities uired (A) isposed of tr. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Employee Unit Option-Right To Buy	\$ 23.235	11/25/2009		М		50,000	11/18/2004	11/18/2011	Common Units	50,0
Employee Unit Option-Right To Buy	\$ 20	11/25/2009		М		25,000	05/10/2008	05/10/2014	Common Units	25,0

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			

COLLINGSWORTH JAMES M 1100 LOUISIANA STREEET, SUITE 1000 HOUSTON, TX 77002

Senior Vice President

## Signatures

Stephanie C. Hildebrandt, Attorney-in-Fact, on behalf of James M. Collingsworth	11/30/2009
**Signature of Reporting Person	Date

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

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.