### Edgar Filing: ENTERPRISE PRODUCTS PARTNERS L P - Form 4

#### ENTERPRISE PRODUCTS PARTNERS L P

Form 4

October 14, 2008

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

**OMB APPROVAL** 

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

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

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Ross Rex

(Street)

5. Relationship of Reporting Person(s) to

Issuer

Symbol

**ENTERPRISE PRODUCTS** 

(Check all applicable)

PARTNERS L P [EPD] (Middle) (Last) (First) 3. Date of Earliest Transaction

(Month/Day/Year)

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

1100 LOUISIANA STREET; SUITE 10/10/2008

1000

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

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

6. Individual or Joint/Group Filing(Check

HOUSTON,, TX 77002

			Torson						
(City)	(State) (Zip	Table I	- Non-Der	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. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)		of (D)	5. Amount of Securities Beneficially Owned Following	Ownership ly Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	
Common									
Units Representing Limited Partnership Interests	10/10/2008		P	20,000	A	\$ 18.68	42,185	D	
Common Units Representing Limited Partnership	10/10/2008		P	6,000	A	\$ 18.14	12,500	I (1)	By Turner Family Trust (2)

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#### 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)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title a Amount Underlyi Securitie (Instr. 3	of ng s	8. Price of Derivative Security (Instr. 5)
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title No	umber	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
<b>F-</b>	Director	10% Owner	Officer	Other		
Ross Rex 1100 LOUISIANA STREET; SUITE 1000 HOUSTON,, TX 77002	X					

### **Signatures**

William L. Soula, Attorney-in-Fact on behalf of Rex C.
Ross
10/14/2008

\*\*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) These units are held by the Nelson C. Turner Family Trust ("Turner Family Trust"); the spouse of the Reporting Person is the trustee and certain of the immediate family member of the Reporting Person are the beneficiaries of the Turner Family Trust.
- (2) The power of attorney under which this form was signed is attached as Exhibit 24.

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.

Reporting Owners 2