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ENTERPRISE PRODUCTS PARTNERS L P

Form 4

February 25, 2010 FORM 4

•		UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549	OMB Number:	3235-0287	
	Check this box if no longer	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES		January 31 2005	
	subject to Section 16.		Estimated average burden hours per		
	Form 4 or Form 5	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,	response	0.5	

See Instruction 1(b).

1. Name and Address of Reporting Person *

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

2. Issuer Name and Ticker or Trading

(Print or Type Responses)

obligations

KNESEK MIC	CHAEL J		Symbol ENTERPR PARTNER			8	I	ssuer (Check	c all applicable)	
(Last)	(First)	(Middle)	3. Date of Ear (Month/Day/	Year)	action			Director _X Officer (give elow)		Owner er (specify	
1100 LOUISIA 1000	1100 LOUISIANA STREET, SUITE 1000		02/23/2010				Ī	SVP, PAO, & Controller			
	(Street)		4. If Amendn Filed(Month/I		Original		А	. Individual or Jos applicable Line) X_ Form filed by O	•		
HOUSTON, T	X 77002						_	Form filed by M erson			
(City)	(State)	(Zip)	Table I	- Non-Deri	vative Sec	urities	Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/	Year) Exec	Deemed cution Date, if nth/Day/Year)	Code (Instr. 8)	4. Securit or(A) or Di (D) (Instr. 3,	sposed	of	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)	
Representing Limited Partnership Interests	02/23/2010)		A(1)	12,500	A	\$0	64,644	D		
Common Units Representing Limited Partnership								739.04	I (2)	By spouse	

OMB APPROVAL

5. Relationship of Reporting Person(s) to

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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)

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. Transactio Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	erivative Expiration Date (Month/Day/Year) equired (A) Disposed of (a) enstr. 3, 4,		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	\$ 32.27	02/23/2010		A	30,000	02/23/2014	12/31/2015	Common Units	30,0

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

KNESEK MICHAEL J 1100 LOUISIANA STREET SUITE 1000 HOUSTON, TX 77002

SVP, PAO, & Controller

Signatures

/s/Wendi S. Bickett, Attorney-in-Fact on behalf of Michael J. Knesek

02/25/2010

**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) Includes Common Units granted to the Reporting Person that have restricted vesting dates and are subject to forfeiture.
- All of these Common Units were acquired by the Reporting Person's spouse in the issuer's Employee Unit Purchase Plan and Distribution (2) Reinvestment Plan. The Reporting Person disclaims any beneficial ownership of these securities, and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

Reporting Owners 2

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(3) The power of attorney under which this form was signed is attached.

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.