### Edgar Filing: Hurlburt Terrance L - Form 4

Hurlburt Terran Form 4	ce L									
February 26, 20	13									
FORM 4	4							OMB AP	PROVAL	
	ATES SECURIT Washi	TIES AND ngton, D		MMISSION	OMB Number:	3235-0287				
Check this be if no longer								January 31, 2005		
subject to Section 16. Form 4 or Form 5	6. SECURITIES							Estimated average burden hours per response 0.5		
obligations may continue <i>See</i> Instruction 1(b).	Section $17(a)$ of	of the Public Utili 30(h) of the Inve	ty Holdin	g Compa	any A	Act of 19				
(Print or Type Resp	oonses)									
Hurlburt Terrance L Symbol			ame and Tio		-		5. Relationship of Reporting Person(s) to Issuer			
			RS L P [EPD]				(Check all applicable)			
(Last) 1100 LOUISIA	(Last)         (First)         (Middle)         3. Date of Ea           (Month/Day/         (Month/Day/         02/22/2013			action			Director 10% Owner _X Officer (give title Other (specify below) below) Group Senior Vice President			
	(Street)		4. If Amendment, Date Original     6. Individual or Jo							
HOUSTON, T	Day/Year) Applicable Line) _X_ Form filed by					One Reporting Person Aore than One Reporting				
		<b>、</b>				Pe	rson			
(City)	(State) (Zip	Table 1				-	ed, Disposed of,		-	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(msu. i)		
Common Units					( )					
Representing Limited Partnership Interests	02/22/2013		F	1,259	D	\$ 55.85	202,424	D		
Common Units Representing Limited Partnership Interests	02/23/2013		F	1,311	D	\$ 55.5	201,113	D <u>(1)</u>		

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities	5		(Instr.	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A		
									Amount		
						Date	Expiration	T:41-	or Norschau		
						Exercisable	Date	Title	Number		
					(A) (D)				of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
Hurlburt Terrance L 1100 LOUISIANA, SUITE 1000 HOUSTON, TX 77002	Group Senior Vice President							
Signatures								
/s/Wendi S. Bickett, Attorney-in-F Hurlburt	02/26/2013							
<u>**</u> Signature of Re		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.

#### **Remarks:**

Transaction Code F - Payment of exercise price or tax liability by delivering or withholding securities incident to the receipt, e

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.