

AMERIGAS PARTNERS LP

Reported by **FORD BRIAN R.**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 01/12/15 for the Period Ending 01/08/15

Address 460 N GULPH RD

BOX 965

VALLEY FORGE, PA 19406

Telephone 6103377000

CIK 0000932628

Symbol APU

SIC Code 5990 - Retail Stores, Not Elsewhere Classified

Industry Oil & Gas Operations

Sector Energy

Fiscal Year 12/31





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person * | | | | * 2 | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|-------------|-------------------------------------|-----------------------------|--|----------|--|---|--------------------|------------------------------|-----------------------------|--|-------------|---|--|---|--------------------------------|
| Ford Brian R | • | | | | | | S PAR | T | NERS | L | P | | | | | | |
| | | | | [| AP | U] | | | | | | | X Direc | ctor | | 10% (| Owner |
| (Last) | (First) | (| (Middle) | 3 | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | Officer below) | eer (give title below) C | | | specify | | | |
| 460 N. GULPH ROAD | | | | | 1/8/2015 | | | | | | | | | | | | |
| (Street) | | | | 4 | 4. If Amendment, Date Original Filed (MM/DD/YYYY) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| KING OF PR | USSIA. | PA | 19406 | | | | | | | | | | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tab | le I - Non | -Deriv | vativ | e Securi | ties Acq | uiı | red, Di | spos | sed of | , or B | eneficially | y Owned | • | | |
| | | | 2. Tr Date | | 2A. Deemed Execution Date, if | Code | | 4. Securities Acquired (A Disposed of (Instr. 3, 4 a | | (A) or Follow of (D) (Instr. | | nount of Securities Beneficially Owned wing Reported Transaction(s) . 3 and 4) | | 6. Ownership Form: Direct (D) or Indirect | Beneficial Ownership | | |
| | | | | | | any | Code | v | Amount | (A) or (D) | Price | | | | | (I) (Instr. 4) | (Instr. 4) |
| APU Common Units 1/3 | | | | 1/8/2 | 2015 | | A | | 1300 | A | \$0.00 | | 2600 | | | I | Benefit Plan ⁽¹⁾ |
| APU Common Units | | | | | | | | | | | | | 1 | .550 | | D | |
| Tab | ole II - De | rivati | ve Securi | ties Bo | enefic | cially O | wned (e | .g. | , puts, | cal | ls, wa | rrant | s, options, | , convert | ible secur | ities) | |
| 1. Title of Derivate Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Trans. Date | Execution Co Date, if (In any | Trans. Code Instr. 8) | Deriva Securi Acqui Dispo | ative | 6. Date Exercisable and Expiration Date | | | | curities rivative str. 3 an | | ing y | 8. Price of Derivative Security (Instr. 5) | of derivative Securities Beneficially Owned Following Reported | Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. | Beneficial |
| | | | | Code V | (A) | (D) | Date Exercisabl | | Expiration Date | Titl | Amo Share | | Number of | | Transaction (s) (Instr. 4) | 4) | |

Explanation of Responses:

(1) Effective January 8, 2015, the reporting person was granted Phantom Units under the AmeriGas Propane, Inc. 2010 Long-Term Incentive Plan on behalf of AmeriGas Partners, L.P. Each Phantom Unit represents the right of the recipient to receive a Common Unit of AmeriGas Partners, L.P. upon retirement or termination of service.

Reporting Owners

| reporting owners | | | | | | | | | | |
|----------------------------------|---------------|-----|-------|----------------|-------|--|--|--|--|--|
| Demonting Overson Name / Address | Relationships | | | | | | | | | |
| Reporting Owner Name / Address | Director | 10% | Owner | ips Officer | Other | | | | | |
| Ford Brian R. | | | | | | | | | | |
| 460 N. GULPH ROAD | X | | | | | | | | | |
| KING OF PRIISSIA PA 19406 | | | | | | | | | | |

Signatures

/s/ Jessica A. Milner, Attorney-in-Fact for Brian R. Ford

1/12/2015

^{**} Signature of Reporting Person

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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.