LANGDON JERRY J

Form 4

December 23, 2008

FORM 4

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

OMB Number:

Expires:

response...

3235-0287 January 31,

0.5

if no longer subject to

Section 16. Form 4 or

Check this box

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

2005 Estimated average burden hours per

OMB APPROVAL

Form 5

obligations may continue. See Instruction

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

1(b).

Common

Units

12/22/2008

(Print or Type Responses)

1. Name and Address of Reporting Person *LANGDON JERRY J			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer				
(I+)	(Eine)	/-ILL:N	Energy Transfer Partners, L.P. [ETP] 3. Date of Earliest Transaction			(Check all applicable)					
(Last)	(First) (1	Middle)	3. Date of	Earliest Tr	ansaction						
			(Month/Day/Year)				Director		6 Owner		
711 LOUISIANA STREET SUITE 900			12/22/2008				_X_ Officer (give title Other (specify				
							below) below) Chief Adminstrative Officer				
(Street)			4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
	Filed(Mon	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person					
HOUSTON,					Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurities Acq	quired, Disposed (of, or Beneficial	lly Owned		
1.Title of	2. Transaction Dat	e 2A. Dee	med	3.	4. Securiti	ies Acquired	5. Amount of	6. Ownership	7. Nature of		
Security (Month/Day/Year) Execution		on Date, if Transaction(A) or Disposed of			Securities	Form: Direct	Indirect				
(Instr. 3)		any		Code	(D)		Beneficially	(D) or	Beneficial		
		(Month/	Day/Year)	(Instr. 8)	(Instr. 3, 4	and 5)	Owned	Indirect (I)	Ownership		
							Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s)				
				Code V	Amount	(D) Price	(Instr. 3 and 4)				

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

A

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

D

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

12,000

(1)

\$0

24,000

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Date		Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(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		or		
						Exercisable	Date				
				~					of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LANGDON JERRY J 711 LOUISIANA STREET SUITE 900 HOUSTON, TX 77002

Chief Adminstrative Officer

Signatures

Peggy J Harrison Attorney-in-Fact

**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) An award of Common Units granted under the Energy Transfer Partners, L.P. Amended and Restated 2004 Unit Plan that will vest 20% per year over five years based on the participant's continued employment.

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.

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