Edgar Filing: COZZA KEITH - Form 4

COZZA KEIT	Ή										
Form 4											
March 04, 201	3										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
	UNITED	STATES		TIES AN lington, I			GE C	OMMISSION	OMB Number:	3235-0287	
Check this if no longer				Expires:	January 31, 2005						
subject to	STATEM	IENT O				CIAL	NERSHIP OF	Estimated a			
Section 16.	ction 16. SECU						burden hours per				
Form 4 or Form 5	Eiled and	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5	
obligations	-						-	1935 or Sectio	n		
may contin	ue.		of the Inve						11		
See Instruct 1(b).	tion	50(11)			ompuny	1100	01 17 1	0			
. ,											
(Print or Type Res	sponses)										
1. Name and Address of Reporting Person _ 2. Issuer COZZA KEITH Symbol				Name and T	icker or T	rading		5. Relationship of Reporting Person(s) to Issuer			
	•	ICAHN ENTERPRISES L.P. [IEP]					(Check all applicable)				
(Last)											
(Last)	(First) (N	(liddle)	(Month/Day	Earliest Transaction				X_ Director 10% Owner			
			03/01/201	-				XOfficer (give titleOther (specify			
L.P., 767 FIFTH AVENUE, SUITE								below) below) EXECUTIVE VICE PRESIDENT			
4600								2.1200111			
(Street) 4. If Amen- Filed(Month			4. If Amend	Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			n/Day/Year)				Applicable Line)				
	NN/ 10152							_X_ Form filed by 0 Form filed by N	One Reporting Pe Iore than One Re		
NEW YORK,	NY 10153							Person		F *****8	
(City)	(State)	(Zip)	Table	I - Non-De	rivative Se	ecuriti	es Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Da	te 2A. De	eemed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year		tion Date, if		onAcquired			Securities	Form: Direct		
(Instr. 3)		any (Montl	h/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			·	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(inform	(Instruction of the state of th					Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
Danasitarra				Code V	Amount	(D)	Price	()			
Depositary Units	03/01/2013			Р	2,000	А	\$ 63	2,000	D (1)		

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)

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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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
COZZA KEITH C/O ICAHN ENTERPRISES L.P. 767 FIFTH AVENUE, SUITE 4600 NEW YORK, NY 10153	Х		EXECUTIVE VICE PRESIDENT				
Signatures							

KEITH COZZA

03/04/2013

<u>**</u>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) The reporting person purchased the securities listed above through the Directed Unit Program conducted in connection with the Issuer's registered public offering of depositary units.

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.