Edgar Filing: POL ANNE - Form 4

POL ANNE												
Form 4												
January 31, 20	019											
FORM	4									OMB APPROVAL		
Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287			
Check this if no longe								Expires: Janua				
subject to Section 16	CHANGES IN BENEFICIAL OWNERSHIP SECURITIES					NERSHIP OF	Estimated average burden hours per					
Form 4 or										response 0.5		
Form 5 obligation								ge Act of 1934,				
may contin	nue. Section 17(a		of the Inv					f 1935 or Sectio	n			
<i>See</i> Instruct 1(b).	ction	50(11)	or the my	vestment v	compun	y 1 iei	. 01 17					
(Print or Type Ro	esponses)											
1. Name and Address of Reporting Person <u>*</u> POL ANNE			2. Issuer Name and Ticker or Trading Symbol				g	5. Relationship of Reporting Person(s) to Issuer				
		AMERIGAS PARTNERS LP [APU]										
(Last)	(First) (M	iddle)	3. Date of Earliest Transaction (Che					ck all applicable)				
460 NORTH GULPH ROAD (Mo				(Month/Day/Year)				X_ Director10% Owner Officer (give titleOther (specify below)Other (specify				
			01/29/2019									
			4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mo KING OF PRUSSIA, PA 19406				•				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
KING OF FF	(USSIA, FA 1940	50						Person				
(City)	(State) (Z	Zip)	Table	e I - Non-Do	erivative S	Securi	ties Aco	quired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	emed on Date, if Day/Year)	Code Disposed of (D)		Securities Beneficially Owned	(D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
APU Common Units	01/29/2019			А	2,850	A	\$ 0	13,815 <u>(1)</u>	I	Benefit Plan (2)		

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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	3	ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
POL ANNE 460 NORTH GULPH ROAD KING OF PRUSSIA, PA 19406	Х							
Signatures								
/s/ Pamela A. Meredith, Attorney-in-Fact for Anne Pol 01/3								
**Signature of Reporting Pe	rson			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) Total gives effect to distribution equivalent accruals.

Effective January 29, 2019, the reporting person was granted Phantom Units under the AmeriGas Propane, Inc. 2010 Long-Term

(2) 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.

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.