SEC I	Form 4
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FORM 4

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 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

1. Name and Address of Reporting Person* MCCREA MARSHALL S III					er Name and Ticker gy Transfer L			ymbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				<u></u>	<u>Sy fransier E</u>	<u> </u>	. 1		X	Director	10% C	Dwner		
(Last) 800 E. SONTERI SUITE 400	(First) RA BLVD.	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/12/2022						- x	Officer (give title below) Co	Other below	(specify)	
(Street) SAN ANTONIO		78258		4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)												
		Table I - No	on-Derivat	tive S	ecurities Acq	uired,	Dis	posed of, o	r Bene	eficially	Owned			
Date			2. Transacti Date (Month/Day		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities A Disposed Of (I			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Units			12/12/20	022		Α		958,950 ⁽¹⁾	A	\$0.00	6,669,267	D		
Common Units											45,389	I	By: Son	

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

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. Transa Code (8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Cash Units	(2)	12/12/2022		Α		319,650		(2)	(2)	Common Units	319,650	(2)	568,817	D	

Explanation of Responses:

1. An award of Restricted Units granted under the Energy Transfer LP Long-Term Incentive Plan that will vest 60% on December 5, 2025 and the remaining 40% on December 5, 2027 generally contingent upon the reporting person's continued employment with the issuer or one of its affiliates on each applicable vesting date.

2. An award of cash units granted under the Energy Transfer LP Long-Term Cash Restricted Unit Plan, scheduled to vest one-third on December 5, 2023, one-third on December 5, 2025, generally contingent upon the reporting person's continued employment with the Issuer or one of its affiliates on each applicable vesting date. The cash units will be settled solely in cash at the fair market value of the underlying common units based on the average closing price of a common unit for the ten (10) trading days immediately preceding the applicable vesting date.

Remarks:

Peggy J. Harrison, Attorney-infact for Mr. McCrea 12/14/2022

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** Signature of Reporting Person Date

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

 \ast 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 Number.