Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT	OF	CHANGES	IN	BENEFICIAL	OWNERSHIP

OMB APF	OMB APPROVAL								
OMB Number: 3235-02									
Estimated average burden									
hours per response	e: 0.5								

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*  MCREYNOLDS JOHN W				2. Issuer Name and Ticker or Trading Symbol Energy Transfer LP [ ET ]									5. Relationship of Reporting Person(s) (Check all applicable)  X Director 10%			) to Iss				
(Last)	(Fir	st) (N	Middle	e)		3. Date of Earliest Transaction (Month/Day/Year) 01/02/2024								Offic belov	er (give v)	title		her (spelow)	pecify	
8111 WE	8111 WESTCHESTER DRIVE, SUITE 600					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)  DALLA	S TX	7	5225											X Form filed by One Reporting Person  Form filed by More than One Reporting Person						
(City) (State) (Zip)			Rule 10b5-1(c) Transaction Indication																	
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - N	lon-Deriva	tive	Secur	rities /	Acc	quire	ed, D	isposed (	of, or I	Benefic	ially Own	ed					
Date			2. Transaction Date (Month/Day/Ye	Execution Date,		T C	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at 5)			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								С	ode	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Units			01/02/202	4			A		9,882(1)	A	\$0.00	671,0	671,053						
Common Units													12,142	,593	I		By: McR Equi Partr L.P.	ners,		
Common Units					17,455,608				,608	608 I		By: McReynolds Energy Partners, L.P. <sup>(2)</sup>								
		Tal	ble II	l - Derivati (e.g., pu							posed of , converti				d					
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8) S. Numbe of Derivative Securitie Acquired (A) or Disposer of (D) (Instr. 3, and 5)		tive ties ed sed	Exp	iration	y/Year)  Securities Underlying Derivative Security (Inst 3 and 4)  Amoun		unt of irities erlying vative rity (Instr. d 4)	8. Price of Derivative Security (Instr. 5)	deriva Securi Benefi Owned Follow Repor Transa	Securities F Beneficially C Owned C		rship (D) irect itr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code V (A) (D			(D)	Date Exe	e rcisabl	Expiration Date	n Title	or Number of Shares							

## **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, 2027 and the remaining 40% on December 5, 2029 generally contingent upon the reporting person's continued service on the Board of the general partner of the Partnership on each applicable vesting date.
- 2. The reported securities are owned directly by a limited partnership of which Mr. McReynolds is the general partner. Mr. McReynolds disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein.

## Remarks:

Sonia Aube, Attorney-in-fact for Mr. McReynolds

01/04/2024

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.