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FERRELLGAS PARTNERS L P Form 3 January 25, 2017 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Title of Derivative Security

(Instr. 4)

1. Name and Address of Reporting Person <u>*</u> Schott Randy V			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol FERRELLGAS PARTNERS L P [FGP]			
(Last) (F	ïrst)	(Middle)	01/18/2017	4. Relationshi Person(s) to Is			5. If Amendment, Date Original Filed(Month/Day/Year)
3345 NW 14TH (St CAMAS, WA	treet)	,		Director X Officer	all applicable) 10% (Other	Owner	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person
				Senior VP	Retail Operation	ons	Form filed by More than One Reporting Person
(City) (St	tate)	(Zip)	Table I - N	Non-Derivati	ive Securiti	es Bei	neficially Owned
1.Title of Security (Instr. 4)			2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	•
Common Units			5,800		D	Â	
Reminder: Report or owned directly or in-		te line for eac	ch class of securities benefic	ially SI	EC 1473 (7-02)	
	informa require	ation conta d to respo	oond to the collection of ined in this form are not nd unless the form displ IB control number.	t			
Table	II - Deriv	vative Secur	ities Beneficially Owned (e	.g., puts, calls,	warrants, opt	tions, co	onvertible securities)

2. Date Exercisable and 3. Title and Amount of

Expiration Title

Securities Underlying

Amount or

Number of

Derivative Security

(Instr. 4)

Expiration Date

Exercisable Date

(Month/Day/Year)

Date

4.

or Exercise

Derivative

Price of

Security

5.

Form of

Derivative

Security:

Direct (D)

or Indirect

Conversion Ownership

OMB Number:	3235-0104						
Expires:	January 31, 2005						
Estimated average							
burden hours per							
response	0.5						

1

6. Nature of Indirect

Beneficial Ownership

(Instr. 5)

Shares (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Ad	dress	Relationships					
L O		10% Owner	Officer	Other			
Schott Randy V 3345 NW 14TH AVE CAMAS, WA 98607	Â	Â	Senior VP Retail Operations	Â			
Signatures							
/s/ Randy V. Schott	01/25/2017						
** Signature of Reporting Person	Date						

Explanation of Responses:

If the form is filed by more than one reporting person, see Instruction 5(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. 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.