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Milford Aaron L Form 4										
February 01, 201									PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								N OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction	F CHAN Section 1 Public U	NGES IN SECUI 16(a) of th Itility Hol nvestment	Estimated burden hou response	Estimated average burden hours per response 0.5						
1(b). (Print or Type Respo	nses)									
1. Name and Address of Reporting Person <u>*</u> Milford Aaron L			2. Issuer Name and Ticker or Trading Symbol MAGELLAN MIDSTREAM PARTNERS LP [MMP]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) ONE WILLIAMS CENTER			3. Date of Earliest Transaction (Month/Day/Year) 01/30/2019			Director 10% Owner X_ Officer (give title Other (specify below) Senior Vice President & CFO				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
(City) (City)		(Zip)				~ •.• •	Person			
1.Title of 2. Tra	ansaction Date hth/Day/Year)	-	ed Date, if	3. Transactio Code (Instr. 8)	4. Securiti onAcquired (Disposed ((Instr. 3, 4	es (A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	of, or Beneficia 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Reminder: Report or	n a separate line	for each cla	ass of sect	urities bene	Person inform require	ns who res ation cont ed to respo ys a curre	or indirectly. spond to the colle ained in this forr ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)	

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (or Dispose (D) (Instr. 3, 4, and 5)	d of				
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Units	<u>(1)</u>	01/30/2019		А	10,726		12/31/2021	12/31/2021	Common Units	10,726

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Milford Aaron L ONE WILLIAMS CENTER TULSA, OK 74172			Senior Vice President & CFO				
Signaturas							

Signatures

/s/ Aaron L. Milford **Signature of Date

Reporting Person

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) One-for-One

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.