FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	Check this box if no longer subject to
$\neg$	Section 16. Form 4 or Form 5
_	obligations may continue. See
	Instruction 1/h)

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* POL ANNE							2. Issuer Name <b>and</b> Ticker or Trading Symbol AMERIGAS PARTNERS LP [ APU ]										all app	ionship of Reporting F all applicable) Director Officer (give title below)		on(s) to Is		
(Last) (First) (Middle) 460 NORTH GULPH ROAD						3. Date of Earliest Transaction (Month/Day/Year) 01/08/2015														Other (speci below)		
(Street)  KING OF PRUSSIA  PA  19406  (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)										Indivine)	Form Form	dual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tabl	e I - Non	-Deriva	ative	Se	curitie	es Ac	quire	d, Di	sp	osed o	f, or	Bene	eficia	ally	Owne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution			Cod	Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,			4 and S		5. Amount of Securities Beneficially Owned Following Reported		nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
										Code V Ar		Amount (A) or (D)		) or )	Price		Transa	action(s) 3 and 4)			(Instr. 4)	
APU Common Units 01/08/							2015		A			1,300		A	\$0.00		3,581			I	Benefit Plan <sup>(1)</sup>	
		Та	ble II - D (e									sed of, on the second s				y Ov	vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transactio Code (Ins				6. Date Exerciss Expiration Date (Month/Day/Yea				7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		str. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Owners Form: Direct ( or Indir (I) (Inst	wnership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)	Date Exerc	sable		xpiration ate	Title	or	ount nber res							

## **Explanation of Responses:**

1. Effective January 8, 2015, the reporting person was granted Phantom Units under the AmeriGas Propane, Inc. 2010 Long-Term 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.

## Remarks:

/s/ Jessica A. Milner, Attorneyin-Fact for Anne Pol 01/12/2015

\*\* 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.