FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|-------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average | hurden | | | | | | | | |

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

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|--|---|--|--|------------------|--|-----------|------------------|--|----------|------------|--|---------------------------------------|---|--|---|---|----------------|---------------------------------------|
| 1. Name and Address of Reporting Person* | | | | | 2. Issuer Name and Ticker or Trading Symbol SUNOCO LOGISTICS PARTNERS LP [| | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| <u>CROPPER STEPHEN L</u> | | | | | SXL] | | | | | | | | X | Direct | or | | 10% O | wner |
| , | | | | | | ~ J | | | | | | | | Officer (give title | | | Other (specify | |
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | below) | | | below) | |
| 1735 MARKET STREET | | | 02 | 02/14/2006 | | | | | | | | | | | | | | |
| | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) PHILADELPHIA PA 19103-7583 | | | | | | | | | | | | Line) | | | | | | |
| | | | | | | | | | | | X Form filed by One Reporting Person | | | | | | | |
| | | — | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tab | le I - Non-D | erivativ | e Sec | curiti | es A | cquired, E | Disp | osed | of, or Be | enefic | ially | Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution I | | | Code (In | | | | 4 and Securi Benefi | | ties Fo cially (D I Following (I) | | vnership n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | v | Amount | (A) or (D) | | e | Transac (Instr. 3 | tion(s) | | | (Instr. 4) | |
| 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 | Code | action (Instr. | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | De Se (Ir | Price of erivative ecurity estr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owners Form: Direct (I or Indire (I) (Instr | Ownership | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Ex Da | piration | Title | Amour or Number of Shares | er | | | | | |
| Restricted Units | (1) | 02/14/2006 | | A ⁽²⁾ | | 132 | | (3) | Γ | (3) | Common Units | 132 | | \$41.41 | 1,622 | | D | |

Explanation of Responses:

- 1. The conversion rate is 1 for 1.
- 2. Restricted Units acquired pursuant to the Directors' Mandatory Deferred Compensation Account, in transactions exempt under Rule 16b-3(d).
- 3. Not Applicable

Bruce D. Davis, Jr., Attorneyin-fact for Stephen L. Cropper

02/16/2006

** Signature of Reporting Person

Date

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

- * 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.