Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20040

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Solings Months						2. Issuer Name and Ticker or Trading Symbol SUNOCO LOGISTICS PARTNERS L.P. [5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Salinas Martin						SXL]								X	Directo	r		10% O	wner	
(Last) (First) (Middle)					_ L	-								X	Officer below)	(give title		Other (s	specify	
800 E SONTERRA BLVD SUITE 400						3. Date of Earliest Transaction (Month/Day/Year) 05/13/2015									Chief Financial Officer					
(Street)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
SAN ANTONIO TX 78258															Form filed by One Reporting Person				n	
(City) (State) (Zip)					_											Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			Transaction Disp Code (Instr.			urities Acquired (A) or led Of (D) (Instr. 3, 4 an			5. Amount of Securities Beneficially Owned Followi Reported		Form (D) or	: Direct r Indirect	Indirect	
									Code	v	Amount	(A) (D)		Price	Transacti (Instr. 3 a	on(s)				
Common Units 05/13/2					3/201	/2015			A		32,600	O ⁽³⁾	4	\$0	46,769			D		
Common Units 05/13/2					3/201	2015			F	F		13,679 I		\$43.859	33,090			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
				(e.g.,	puts	, cai	IS, W	arrant	s, optio	ns,	convert	ible se	cur	ities)						
Derivative Conversion Date Executi Security or Exercise (Month/Day/Year) if any			3A. Deeme Execution if any (Month/Day	Date, Transacti Code (Ins					6. Date Ex Expiration (Month/Da	n Date	;	d 7. Title and Amo of Securities Underlying Deri Security (Instr. 3		erivative	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
	Code		v	(A)	(D)	Date Exercisal		Expiration Date	Title	N	mount or umber of nares									
Restricted	(1)	05/12/2015			M			32,600	(2)		(2)	Common	ı 3	2,600 ⁽³⁾	\$0	0		D		

Explanation of Responses:

- 1. Each Restricted Unit represents a contingent right to receive one Common Unit of SXL.
- 2. Not applicable.
- 3. In connection with Mr. Salinas' termination of employment, Mr. Salinas and Energy Transfer Partners, L.P. entered into a Separation and Non-Solicit Agreement and Full Release of Claims (the "Separation Agreement"), which became effective on May 9, 2015. The Separation Agreement provided for, among other things, acceleration of the vesting of all unvested restricted common units awarded to Mr. Salinas pursuant to the terms of the Sunoco Partners LLC Long-Term Incentive Plan, as amended (the "SXL Unit Plan"). As of May 9, 2015, Mr. Salinas had outstanding awards under the SXL Unit Plan of 32,600 restricted common units that were otherwise not scheduled to vest until after Mr. Salinas' termination of employment.

<u>Peggy J. Harrison, Attorney-in-fact for Mr. Salinas</u>

05/14/2015

** 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.