FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL OMB Number: 3235

	OMB Number:	3235-0287							
ı	Estimated average burden								
ı	hours nor resnance.	0.5							

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 or Section 30(h) of the Investment Company Act of 1940

							. ,				· ·									
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol SUNOCO LOGISTICS PARTNERS L.P. [									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Lauterbach Kurt A													1	Directo	r		10% O	vner		
							SXL ]									(give title		Other (s	specify	
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year)								Sr. VP, Lease Acquisitions					
1818 MARKET STREET, SUITE 1500					12	12/03/2013												-		
(Street)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
PHILADELPHIA PA 19103														Form filed by One Reporting Person				n		
													Form filed by More than One Reporting Person				ting			
(City) (State) (Zip)																				
		Tak	ole I - Nor	n-Deriv	ativ	e Se	curities	Acc	quired,	Dis	posed o	f, or Be	enef	icially	Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4		4 and Securiti Benefic		s Illy ollowing	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or F	rice	Transaction(s) (Instr. 3 and 4)				(111511.4)	
Common Units												32,571			D					
			Table II -								osed of, onvertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution E if any (Month/Day	Date, T	Code (Insti				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					ode	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	nount imber ares		(Instr. 4)	on(s)			
Restricted	(1)	12/03/2013		$\neg$	A		7,000(2)		(3)	$\dashv$	(3)	Commo	<sup>1</sup> 7,	,000	\$0	14,00	0	D	Ì	

## Explanation of Responses:

- 1. Each Restricted Unit represents a contingent right to receive one Common Unit of SXL.
- 2. This Form 4 is being filed to report a grant of Restricted Units awarded on December 3, 2013 pursuant to the Sunoco Partners LLC ("Company") Long-Term Incentive Plan ("LTIP") in a transaction exempt under Rule 16b-3. Payout of the LTIP Restricted Units vests incrementally over a five-year period and is contingent only upon the continued employment of the reporting person with the Company at the time of vesting.
- 3. The Restricted Units will vest incrementally over five years contingent upon the continued employment of the reporting person with the Company through each of the vesting dates.

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

12/05/2013 Date

\*\* Signature of Reporting Person

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.