Edgar Filing: Funk Robert E - Form 4

Funk Robert	E											
Form 4 February 18,	2010											
							OMB A	PPROVAL				
FORM 4 UNITED STATES SECURI Wash					ND EX(D.C. 205	OMB Number:	3235-0287					
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru- 1(b).	er STAT 5. Filed p s Section 1									January 31, 2005 Estimated average burden hours per response 0.5		
(Print or Type R	esponses)											
Funk Robert E Syn Cal			Symbol	Name and Specialty			-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				Earliest Tra ay/Year)	Insaction			XDirector10% Owner Officer (give titleOther (specify below)below)				
	(Street)	ndment, Date Original hth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 						
INDIANAPO	DLIS, IN 462	14						Form filed by M Person	More than One R	eporting		
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
(Instr. 3) any				4. Securi onAcquirec Disposec (Instr. 3,	l (A) o l of (D 4 and)	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
G				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Units	02/16/2010			М	713	А	<u>(1)</u>	28,544	D			

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: Funk Robert E - Form 4

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)	4. Transactiv Code (Instr. 8)	onof		6. Date Exer Expiration D (Month/Day,	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price o Derivativ Security (Instr. 5)
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Units	<u>(1)</u>	02/16/2010		А	713		(2)	(2)	Common Units	713	\$ 19.8
Phantom Units	<u>(1)</u>	02/16/2010		М	713		(2)	(2)	Common Units	713	\$ 0
Phantom Units	<u>(1)</u>	02/16/2010		А	235		(3)	(3)	Common Units	235	\$ 19.8

Reporting Owners

Reporting Owner Name / Address		Relationships							
The Portuge of the France of the Portuge	Dir	rector	10% Owner	Officer	Other				
Funk Robert E 2780 WATERFRONT PKWY E. DRIVE SUITE INDIANAPOLIS, IN 46214	E 200	X							
Signatures									
/s/ R. Patrick Murray, II, as attorney-in-fact	02/18/201	0							
**Signature of Reporting Person	Date								
Explanation of Responses:									

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) Each Phantom Unit is the economic equivalent of a Calumet Specialty Products Partners, L.P. Common Unit
- (2) Each Phantom Unit becomes payable either in the form of a Common Unit or the cash value thereof upon the earlier of the date specified by the reporting person or the reporting person's termination date. Phantom Units are 100% vested.

Each Phantom Unit becomes payable either in the form of a Common Unit or the cash value thereof upon the earlier of the date specified (3) by the reporting person or the reporting person's termination of service. 25% of the Phantom Units vest on July 1 of each year beginning

on July 1, 2011.

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.