Edgar Filing: NuStar Energy L.P. - Form 4

Form 4 November 1	rgy L.P. .8, 2016										
										OMB APPROVAL	
FORM 4 UNITED STATES SECURITIES AND E Washington, D.C. 2							NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no lon	~~~		_						Expires:	January 31,	
subject t Section Form 4 o	16. or	STATEMENT OF CHANGES IN BE SECURIT						Estimated a burden hou response	ed average hours per		
Form 5 obligations may continue.Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19401(b).30(h) of the Investment Company Act of 1940											
(Print or Type	Responses)										
Perry Amy L. Sy			2. Issuer Name and Ticker or Trading Symbol NuStar Energy L.P. [NS]					5. Relationship of Reporting Person(s) to Issuer			
							(Check all applicable)				
(Last) 19003 IH-1	e of Earliest Transaction h/Day/Year) //2016					Director 10% Owner X_ Officer (give title Other (specify below) below) SVP, GC-Corp & Com & Corp Sec					
Filed(Mon				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
SAN ANTO								Form filed by M	Iore than One Re	porting	
(City)	ONIO, TX 78257	n) m		P		-		Person			
(City)	(State) (Zi	18		n-D			-	Person uired, Disposed of	, or Beneficial	ly Owned	
(City) 1.Title of Security (Instr. 3)	(State) (Zi 2. Transaction Date 2 (Month/Day/Year) E a	A. Deemed	3. Transac Code	ctio	erivative 3 4. Securi n(A) or Di (Instr. 3,	ties A spose 4 and (A)	cquired d of (D)	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		ly Owned 7. Nature of Indirect	
1.Title of Security	(State) (Zi 2. Transaction Date 2 (Month/Day/Year) E a	A. Deemed Execution Date, if ny	3. Transac Code) (Instr. 8	ctio 8)	4. Securi n(A) or Di	ties A spose 4 and	cquired d of (D)	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	ly Owned 7. Nature of Indirect Beneficial Ownership	
1.Title of Security	(State) (Zi 2. Transaction Date 2 (Month/Day/Year) E a	A. Deemed Execution Date, if ny	3. Transac Code) (Instr. 8	ctio 8)	4. Securi n(A) or Di (Instr. 3,	ties A spose 4 and (A) or	cquired d of (D) 5)	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I)	ly Owned 7. Nature of Indirect Beneficial Ownership	
1.Title of Security (Instr. 3)	(State) (Zi 2. Transaction Date 2 (Month/Day/Year) E a (I	A. Deemed Execution Date, if ny	3. Transac Code (Instr. 8 Code G	ctio 8) V V	4. Securi n(A) or Di (Instr. 3, Amount	ties Adispose 4 and (A) or (D)	cquired d of (D) 5) Price	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ly Owned 7. Nature of Indirect Beneficial Ownership	
1.Title of Security (Instr. 3) Common Units Common	(State) (Zi 2. Transaction Date 2 (Month/Day/Year) E a (1) 05/17/2016	A. Deemed Execution Date, if ny	3. Transac Code (Instr. 8 Code G	ctio 8) V V	4. Securi n(A) or Di (Instr. 3, Amount 215	ties Adispose 4 and (A) or (D) D	cquired d of (D) 5) Price \$ 0	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 8,547	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ly Owned 7. Nature of Indirect Beneficial Ownership	
1.Title of Security (Instr. 3) Common Units Common Units Common	(State) (Zi 2. Transaction Date 2 (Month/Day/Year) E a (1) 05/17/2016 06/29/2016	A. Deemed Execution Date, if ny	3. Transac Code (Instr. 8 Code G G	v V V	4. Securi n(A) or Di (Instr. 3, Amount 215 40	(A) or (D) D	cquired d of (D) 5) Price \$ 0 \$ 0	Person uired, Disposed of 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 8,547 8,507	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) D	ly Owned 7. Nature of Indirect Beneficial Ownership	

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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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or 1		
						Exercisable	Date		Number		
					(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
Perry Amy L. 19003 IH-10 WEST SAN ANTONIO, TX 78257			SVP, GC-Corp & Com & Corp Sec			
Signatures						
/s/ Michelle S. Miller, as Attor Perry	ney-in-Fa	ct for Amy L	. 11/18/2016			

Explanation of Responses:

**Signature of Reporting Person

- * 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) Award of restricted units. The restricted units vest annually in equal increments over a five-year period beginning on November 16, 2017.

Date

(2) "Common Units" reported are units not distributed to the reporting person in order to satisfy the reporting person's tax obligations on grants.

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.