Edgar Filing: Carnes Martha Z. - Form 4

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| Form 4 | | | | | | | | | | | |
|--|--|---------------|--|--------------|---|----------|--|---|--|---|--|
| FORM Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin | Section 16.SECURITIESForm 4 orForm 5Form 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or Sectionsee Instruction30(h) of the Investment Company Act of 1940 | | | | | | Number:3235-028Number:January 3Expires:200Estimated averageburden hours perresponse0 | | | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Carnes Martha Z. | | | 2. Issuer Name and Ticker or Trading Symbol SunCoke Energy Partners, L.P. [SXCP] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| | | | 3. Date of Earliest Transaction(Month/Day/Year)09/27/2017 | | | | | X_Director10% Owner Officer (give titleOther (specify below) below) | | | |
| | (Street) 4. If Amer Filed(Mont | | | | e Original | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| LISLE, IL 60 |)532 | | | | | | | Person | | porting | |
| (City) | (State) | (Zip) | Table | e I - Non-Do | erivative S | Securi | ties Ac | quired, Disposed o | of, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution any | Execution Date, if any | | Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or | | 9) 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Indirect Beneficial | |
| Common Units | 09/27/2017 | | | Code V | Amount 419 (1) | (D) A | Price \$ 0 | 419 | I | Martha Z. Carnes and Mark S. Carnes TIC | |

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.

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 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) | 4. Transactio Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | |
|--|-----------|---------------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Carnes Martha Z. 1011 WARRENVILLE ROAD, ST LISLE, IL 60532 | TE. 600 | Х | | | | | | |
| Signatures | | | | | | | | |
| /s/ Rita M. Slager, attorney-in-fact | 09/28/201 | | | | | | | |
| **Signature of Reporting Person | | Date | | | | | | |
| Evaloretion of Deer | | | | | | | | |

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) Total of 419 common units issued pursuant to the SunCoke Energy Partners, L.P. Long Term Performance Enhancement Plan, in a transaction exempt under Rule 16b-3(d).

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.