Calumet Specialty Products Partners, L.P. Form 4 November 28, 2016

November 20	5, 2010												
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB APPROVAL					
								OMB Number:	3235-0287				
Check thi if no long							Expires:	January 31, 2005					
subject to Section 10 Form 4 or Form 5		SECU	RITIES			NERSHIP OF ge Act of 1934,	Estimated a burden hou response	average Irs per					
obligation may conti <i>See</i> Instru 1(b).	inue. Section		Public Ut) of the In	•	•	· ·	•	f 1935 or Sectio 40	on				
(Print or Type R	Responses)												
1. Name and Address of Reporting Person <u>*</u> Go Timothy			Symbol	Name and				5. Relationship of Reporting Person(s) to Issuer					
	Calumet L.P. [CI	-	ty Produ	cts Pa	artners,	(Check all applicable)							
(Last) 2780 WATE EAST DRIV	(Month/D	3. Date of Earliest Transaction(Month/Day/Year)11/25/2016					Director 10% Owner X Officer (give title Other (specify below) below) Chief Executive Officer						
(Street)			4. If Ame	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
Filed(Month/Day INDIANAPOLIS, IN 46214					r)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(State)	(Zip)				_		Person					
								quired, Disposed o		-			
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Executi any	emed on Date, if /Day/Year)	Code (Instr. 8)	ion(A) or I (D)	Disposo , 4 and (A) or	ed of 15)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
Common Units	11/25/2016			Р	769	А	\$ 4.25	91,682	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. Transa Code (Instr.	 5. ctionNumber of 8) Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3 4, and 5 	Expiration E (Month/Day ve es d d	6. Date Exercisable and Expiration Date (Month/Day/Year)		tle and unt of crlying rities r. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
_				Code	V (A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Reporting Owners											
	Reporting (Wher Name / Address		_			Relationships				
			D	irector	10% Owne	r Officer			Other		
2780 WA	Go Timothy 2780 WATERFRONT PARKWAY EAST DRIVE				Chief Executive Officer						

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Signatures

INDIANAPOLIS, IN 46214

SUITE 200

R. Patrick Murray, II, as attorney-in-fact

11/28/2016

Date

**Signature of Reporting Person

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).

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.