FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 20549 | OMB APPROVAL |
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 TEPPCO PARTNERS LP [TPP] | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|---|--|--|--|---------------------------------|--|--|-------|--|------|---|---|-----------------------|--|--|--|----------------------------------|---|---------------------------------------|--|
| SNELL RICHARD S | | | | | | | | | | 1 | | | X | Director | r | | 10% Ow | ner | |
| (Last) (First) (Middle) 1100 LOUISIANA STREET; SUITE 1000 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/02/2007 | | | | | | | | Officer (below) | (give title | | Other (s below) | pecify | |
| | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) HOUST | ON T | TX 77002 | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | Person | | | | | |
| | | Tak | ole I - Non- | -Derivat | ive Se | curities | Acq | uired, | Disp | osed of, | , or B | enefic | cially | Owned | | | | | |
| Date | | | | 2. Transac Date (Month/Da | Execution Date | | Date, | Transaction Disposed C | | es Acquired (A) or Of (D) (Instr. 3, 4 a | | | 5. Amoun Securities Beneficia Owned Fo | s Ily ollowing | Form: | Direct I Indirect E tr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | v | Amount (A) or (D) | | ice | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | |
| Common Units | | | | | | | | | | | | | 54 | 49 | | D | | | |
| | 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 Da if any (Month/Day/Y | Cod | saction e (Instr. | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | te | 7. Title and Amount of Securities Underlying Derivative Security (Inst and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transaction | lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | |
| | | | | Cod | e V | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amou Numb Share | unt or (In: per of | | (Instr. 4) | טוו(צ) | | | |
| UAR | \$45.3 | 05/02/2007 | | A | | 22,075 ⁽¹⁾ | | 05/02/2 | 012 | 05/02/2012 | Units | 22,07 | 75(1) | \$0 | 22,075 | (1) | D ⁽²⁾ | | |

Explanation of Responses:

1. The Unit Appreciation Rights ("UAR") entitle the reporting person to receive on May 2, 2012 an amount equal to the excess, if any, of the Fair Market Value of a Unit over the Grant Price per Unit in Units or cash at the discretion of the Committee. The UARs are subject to forfeiture.

2. The power of attorney under which this form was signed is on file with the Commission.

Remarks:

Patricia A. Totten, Attorney-in-

Fact on behalf of Richard S.

05/03/2007

Snell

** Signature of Reporting Person Date

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.