Calumet Specialty Products Partners, L.P.

Form 4

November 17, 2015

FORM 4									PPROVAL	
Washington, D.C. 20549								N OMB Number:	3235-028	
Check this bo if no longer subject to Section 16. Form 4 or	F CHANGES IN BENEFICIAL OWN SECURITIES				WNERSHIP OI	Expires: Estimated burden hou response	urs per			
Form 5 obligations may continue. <i>See</i> Instruction 1(b).	Section 17((a) of the	Public U	tility Hol	ding Cor		nge Act of 1934, of 1935 or Secti 940	,		
(Print or Type Respo	onses)									
1. Name and Address of Reporting Person * Schumacher Amy M			2. Issuer Name and Ticker or Trading Symbol Calumet Specialty Products Partners, L.P. [CLMT]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 2780 WATERFRONT PKWY. E. DR., SUITE 200			3. Date of Earliest Transaction (Month/Day/Year) 11/13/2015				X Director 10% Owner Officer (give title Other (specify below)			
INDIANAPOLI	(Street)			endment, Da onth/Day/Year		1	Applicable Line) _X_ Form filed by	Joint/Group Fili y One Reporting P y More than One R	erson	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned	
	Transaction Date 2A. Deem (onth/Day/Year) Execution any (Month/Day/Day)		Date, if	3. Transactio Code (Instr. 8)	Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report o	n a separate line	e for each cl	ass of sec	urities benef	ficially own	ned directly o	or indirectly.			
					inforn requir	nation cont ed to respo ys a curre	spond to the colle ained in this form and unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)	
	Tab			_		posed of, or	Beneficially Owne	d		

1. Title of 2. 3. Transaction Date 3A. Deemed 4. 5. 6. Date Exercisal Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date

Underlying Securities Derivative

6. Date Exercisable and 7. Title and Amount of 8. Price of

Edgar Filing: Calumet Specialty Products Partners, L.P. - Form 4

Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of Deriv Secur Acqui (A) or Dispo of (D) (Instr. 4, and	rative rities ired rosed) . 3,	(Month/Day/	(Year)	(Instr. 3 and	4)	Security (Instr. 5)
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Units	<u>(1)</u>	11/13/2015		A	38		(2)	(2)	Common Units	38	\$ 26.14
Phantom Units	<u>(1)</u>	11/13/2015		A	12		(3)	(3)	Common Units	12	\$ 26.14

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
ner Amy M							
TEDEDON'T DIVIVI E DD CHITE 100	v						

Schumacher Amy M

2780 WATERFRONT PKWY. E. DR., SUITE 200

INDIANAPOLIS, IN 46214

Signatures

R. Patrick Murray, II, as attorney-in-fact 11/17/2015

**Signature of Reporting Person Date

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, 2016.

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.

Reporting Owners 2