

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
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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* <u>FERRELL COMPANIES INC</u> <hr/> (Last) (First) (Middle) 7500 COLLEGE BOULEVARD SUITE 1000 <hr/> (Street) OVERLAND PARK KS 66210 <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 08/01/1999	3. Issuer Name and Ticker or Trading Symbol <u>FERRELLGAS PARTNERS L P [ FGP ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) <input type="checkbox"/>	5. If Amendment, Date of Original Filed (Month/Day/Year) <hr/> 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person <input checked="" type="checkbox"/>

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Units	17,803,883 <sup>(1)(2)</sup>	D	
Common Units	11,087 <sup>(1)(2)</sup>	I	By Subsidiaries

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person* <u>FERRELL COMPANIES INC</u> <hr/> (Last) (First) (Middle) 7500 COLLEGE BOULEVARD SUITE 1000 <hr/> (Street) OVERLAND PARK KS 66210 <hr/> (City) (State) (Zip)		
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1. Name and Address of Reporting Person* <u>FERRELL COS INC EMPLOYEE STOCK OWNERSHIP TRUST</u> <hr/> (Last) (First) (Middle) 7500 COLLEGE BOULEVARD SUITE 1000 <hr/> (Street) OVERLAND PARK KS 66210 <hr/> (City) (State) (Zip)		
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**Explanation of Responses:**

- Owned by Ferrell Companies, Inc.
- Owned indirectly by Ferrell Companies, Inc. Employee Stock Ownership Plan, which owns 100% of the Common Stock of Ferrell Companies, Inc.

/s/ Kevin T. Kelly

10/04/2006

[/s/ Kevin B. Kolb, on behalf of the Ferrell Companies, Inc. Employee Stock Ownership Plan](#) [10/04/2006](#)

\*\* 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 5 (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.**