FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

Form 3 Holdings Reported.

Instruction 1(b)

Form 4	Transactions R	eported.	File	ed pursuant to or Sectior					ities Excha ompany Ac									
1. Name and Address of Reporting Person* <u>Breuckmann Pamela A</u>			2. Issuer Name and Ticker or Trading Symbol FERRELLGAS PARTNERS L P [FGP]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner									
(Last) (First) (Middle) 10599 W. 175TH STREET				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 07/31/2018						Year)	Officer (give title below)				Other (specify below)			
(Street) OVERLA PARK (City)	AND KS		6221 Zip)	4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Li								ndividual or Joint/Group Filing (Check Applicable X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	d, Di	sposed (of, or	Benefici	ally (Owne	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Disposed	Securiti Benefic		ies O		ership n: Direct	7. Nature of Indirect Beneficial Ownership		
				(Month/Day/Year)		8)		Amou	Amount (A		Price	Is Y	Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		(Instr. 4)	
Common Units			07/10/2018	W		V	62		A	\$0		35,062		D				
		Та	ble II - Derivat (e.g., pı	ive Securi uts, calls,								•	vned					
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. Transaction Code (Instr. 8)	5. Num of Deriv Secun Acqu (A) or Dispo of (D) (Instr. and 5	ative rities ired osed	Expira (Mont	te Exercisable and ation Date th/Day/Year) Expiration isable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	

Explanation of Responses:

/s/ Pamela A. Breuckmann

08/15/2018

** 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.