SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-OMB Number: 0104

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Estimated average burden hours per response: 0.5

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 A Cherian I	orting Person <sup>*</sup>	2. Date of E Requiring S (Month/Day 09/20/202	itatement /Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol   FERRELLGAS PARTNERS L P FGPR I						
(Last) C/O FERRE	(First) (Middle) ERRELLGAS, INC.				4. Relationship of Reporting Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)		
	RTY PLAZA				X Officer (give title below) Chief Financial	below)	(specify	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) LIBERTY	МО	64068				UTIICET		Form filed by More than One Reporting Person		
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				I	2. Amount of Securities Beneficially Owned (Instr. 4)			l. Nature of Indirect Beneficial Dwnership (Instr. 5)		
Class A Units					0	I	)			
Table II - Derivative Securities Beneficially Owned   (e.g., puts, calls, warrants, options, convertible securities)										
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversi or Exerci Price of	se Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivativ Security	Direct (D) e or Indirect (I) (Instr. 5)	5)	
Explanation of Responses:										

Responses

## /s/ Dhiraj Cherian

<u>10/04/202</u>1

Date

\*\* Signature of Reporting Person

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.