Shell Midstream Partners, L.P.

Form 4

partner interests

October 31, 2014

								OMB AF	PPROVAL	
FORM	4 UNITED STATE		TIES AN ington, I			GE CO	OMMISSION	OMB Number:	3235-0287	
Check this b		vv asii	ington, i	J.C. 203.	17			Expires:	January 31,	
if no longer subject to Section 16. Form 4 or	STATEMENT (STATEMENT OF CHANGES IN BENEFICIAL OWN SECURITIES							2005 everage rs per 0.5	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							response	0.0		
(Print or Type Res	sponses)									
1. Name and Add Montana Marg	Symbol	2. Issuer Name and Ticker or Trading Symbol Shell Midstream Partners, L.P.				5. Relationship of Reporting Person(s) to Issuer				
		[SHLX]					(Спеск	all applicable)	
(Last) 910 LOUISIA	(Month/Day	3. Date of Earliest Transaction (Month/Day/Year) 10/29/2014				_X Director _X Officer (give to elow)		Owner er (specify		
	4. If Amend	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
HOUSTON, T	TX 77002	Filed(Month		Ü		A 	applicable Line) X_ Form filed by Or Form filed by More erson	ne Reporting Per	rson	
(City)	(State) (Zip)	Table 1	I - Non-De	rivative Se	curiti		red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	any	Deemed cution Date, if nth/Day/Year)	Code (Instr. 8)	4. Securion(A) or D (Instr. 3,	(A) or	d 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)	
Common Units representing limited partner interests	10/29/2014		P			\$ 33.4	3,000	D		
Common Units representing limited	10/30/2014		P	2,800	A	\$ 34.03	5,800	D		

Units

representing 10/30/2014 P 100 A \$ 34.1 5,900 D

partner interests

Common

Units

representing limited 10/30/2014 P 100 A \$ 6,000 D

partner interests

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of	•
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	tionNumber	Expiration D	ate	Amou	ınt of	Derivative	į
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative	e		Secur	rities	(Instr. 5)	į
	Derivative				Securities	;		(Instr	. 3 and 4)		
	Security				Acquired						1
					(A) or						į
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
									A 4		
									Amount		
						Date	Expiration	T:41-	or Namel		
						Exercisable Date	Date	Title	Number		
				α .	(A) (D)				of		
				Code \	V (A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address			•	
	Director	10% Owner	Officer	Other

Montana Margaret C

910 LOUISIANA STREET X See Remarks

HOUSTON, TX 77002

Reporting Owners 2

Relationships

Signatures

/s/ Lori M. Muratta, as Attorney-in-Fact for Margaret C. Montana

10/31/2014

**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).

Remarks:

Chief Executive Officer and President

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.

Signatures 3