Fehsenfeld F	Fred M Jr										
Form 5	2010										
February 24,									PPROVAL		
FORM	-	STATES SECU	RITIFS AN	D FXCF	IANGE	F. CO	OMMISSION	OMB	3235-0362		
Check this	s box if		shington, D				5101101051010	Number.	January 31,		
no longer to Section	16							Expires:	2005		
Form 4 or Form       ANNUAL STATEMENT OF CHANGES IN BENEFICIAL       Estimated average         5 obligations       OWNERSHIP OF SECURITIES       burden hours per         may continue.       response								rs per			
See Instruct 1(b).		suant to Section	16(a) of the S	Securities	s Excha	inge	Act of 1934,				
Form 3 Ho Reported	oldings Section 17(a							n			
Form 4 Transactio Reported	ons	30(h) of the I	nvestment Co	ompany .	Act of 1	194(	)				
	Address of Reporting F	Person <u>*</u> 2. Issuer	Name <b>and</b> Ticl	ker or Trac	ling		5. Relationship of	Reporting Per	son(s) to		
Fehsenfeld l	Fred M Jr	Symbol Colum	at Spacialty I	Producto	Dortnor		Issuer				
		L.P. [C	et Specialty I [LMT]	Touucis	r ai uici	15,	(Check all applicable)				
(Last)	(First) (M	,	nent for Issuer's	Fiscal Yes	ar Ended		_X_ Director		o Owner		
			(Month/Day/Year) 12/31/2009				XOfficer (give titleOther (specify below) below)				
2780 WATH DRIVE SUI	ERFRONT PKWY ITE 200							Chairman			
	(Street)	4. If Am	endment, Date	Original			6. Individual or Jo	oint/Group Rep	orting		
		Filed(Me	Filed(Month/Day/Year)				(check applicable line)				
							(cliec	k applicable line	)		
INDIANAP	OLIS, IN 462	14					_X_ Form Filed by	One Reporting P	erson		
			Form Filed by I Person					More than One Reporting			
(City)	(State) (	(Zip) Tal	ole I - Non-Deri	ivative Sec	curities A	Acqu	ired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transaction	4. Securi Acquired			5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect		
(Instr. 3)	( <b>)</b> ,	any (Month/Day/Year)	Code	Disposed of (D) (Instr. 3, 4 and 5)		)	Beneficially Owned at end	(D) or Indirect (I)	Beneficial Ownership		
					(A)		of Issuer's Fiscal Year	(Instr. 4)	(Instr. 4)		
				Amount	or (D) F	Price	(Instr. 3 and 4)				
Common Units	05/06/2009	Â	M4	1,136	A \$	\$ <u>(1)</u>	14,247.94	D	Â		
Common Units	05/06/2009	Â	M4	45	A \$	\$ <u>(1)</u>	14,292.94	D	Â		
Common Units	08/03/2009	Â	M4	803	A \$	§ <u>(1)</u>	15,095.94	D	Â		

Common

Units

08/14/2009

Â

M4

62

Â

D

A \$<u>(1)</u> 15,157.94

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Common Units	11/03/2009	Â	M4	870	А	\$ <u>(1)</u> 16,027.94	D	Â
Common Units	11/13/2009	Â	M4	74	А	\$ <u>(1)</u> 16,101.94	D	Â

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

Persons who respond to the collection of information<br/>contained in this form are not required to respond unless<br/>the form displays a currently valid OMB control number.SEC 2270<br/>(9-02)

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

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. Numb Derivati Securitie Acquired or Dispo of (D) (Instr. 3, and 5)	ve es d (A) osed	6. Date Exer Expiration D (Month/Day	ate	7. Title and A Underlying S (Instr. 3 and	Securities	8. 1 De See (In
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Units	Â	05/06/2009	Â	A4	1,136	Â	(2)	(2)	Common Units	1,136	9
Phantom Units	Â	05/06/2009	Â	M4	1,136	Â	(2)	(2)	Common Units	1,136	
Phantom Units	Â	05/06/2009	Â	A4	375	Â	(3)	(3)	Common Units	375	5
Phantom Units	Â	05/15/2009	Â	A4	45	Â	(2)	(2)	Common Units	45	\$
Phantom Units	Â	05/15/2009	Â	M4	45	Â	(2)	(2)	Common Units	45	
Phantom Units	Â	05/15/2009	Â	A4	15	Â	(3)	(3)	Common Units	15	\$
Phantom Units	Â	08/04/2009	Â	A4	803	Â	(2)	(2)	Common Units	803	\$
Phantom Units	Â	08/04/2009	Â	M4	803	Â	(2)	(2)	Common Units	803	
Phantom Units	Â	08/04/2009	Â	A4	265	Â	(3)	( <u>3)</u>	Common Units	265	\$
Phantom Units	Â	08/14/2009	Â	A4	62	Â	(2)	(2)	Common Units	62	\$
Phantom Units	Â	08/14/2009	Â	M4	62	Â	(2)	(2)	Common Units	62	

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Phantom Units	Â	08/14/2009	Â	A4	20	Â	( <u>3)</u>	(3)	Common Units	20	\$
Phantom Units	Â	11/03/2009	Â	A4	870	Â	(2)	(2)	Common Units	870	S
Phantom Units	Â	11/03/2009	Â	M4	870	Â	(2)	(2)	Common Units	870	
Phantom units	Â	11/03/2009	Â	A4	287	Â	( <u>3)</u>	(3)	Common Units	287	S
Phantom Units	Â	11/13/2009	Â	A4	74	Â	(2)	(2)	Common Units	74	\$
Phantom Units	Â	11/13/2009	Â	M4	74	Â	(2)	(2)	Common Units	74	
Phantom units	Â	11/13/2009	Â	A4	24	Â	( <u>3)</u>	(3)	Common Units	24	\$

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Fehsenfeld Fred M Jr 2780 WATERFRONT PKWY E. DRIVE SUITE 200 INDIANAPOLIS, IN 46214	ÂX	Â	Chairman	Â			
Signatures							

/s/ R. Patrick Murray, II, as	02/24/2010
attorney-in-fact	02/24/2010

\*\*Signature of Reporting Person

**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).

Date

- (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 January 22 of each year beginning on January 22, 2010.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.