FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average I	hurden								

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	Section	30(n) c	of the	invest	ment (company Ac	t of 1940							
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol NuStar Energy L.P. [NS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Brown Mary Rose				1			<i>0</i> ,—							Direc		10% C			
(Last) (First) (Middle) 19003 IH-10 WEST						3. Date of Earliest Transaction (Month/Day/Year) 09/29/2015							$\overline{}$	X	Officer (give title below)		Other below)	(specify	
					09/										EVP & CAO				
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year) 10/01/2015								6. Individual or Joint/Group Filing (Check Applicable Line)					
SAN ANTONIO TX 78257				10/01/2013								X	Form filed by One Reporting Person						
(City) (State) (Zip)													Form filed by More than One Reporting Person						
(City)	(51		Zip)		ļ														
		Tabl	e I - I	Non-Deriv	ative	Secu	urities	s Ac	quire	ed, D	isposed	of, or E	Benefic	ially	Owne	ed ———			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					Execution Date,		e, 1	3. Transaction Code (Instr. 8)					d 5) Secu Bene Own		mount of urities eficially led Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								ď	Code	v	Amount	(A) or (D)	Price		Trans	action(s) . 3 and 4)		(111341.4)	
Common units 09/29/3				09/29/20	15				P		1,332	A	\$42.12	\$42.1239 ⁽¹⁾		18,344	D		
Common units 09/29/2				09/29/20	15				P		1,000	A ⁽²⁾	\$43.	.769		19,344	D		
		Та	ıble I	l - Derivat (e.g., pı							posed of converti				vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) if	Execu if any			action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expir	te Exe ration I th/Day		7. Title Amour Securi Underl Deriva Securi and 4)	nt of ties ying	Deriv Secu (Inst	vative curity Str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
													Amount or						

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$42.12 per unit to \$42.15 per unit. The price reported above reflects the weighted average purchase price. Note that due to field restrictions in Table 1, Column 4, the last decimal place does not appear. The total weighted average purchase price is actually \$42.12391. Upon request from the Securities and Exchange Commission, the issuer or a unitholder of the issuer, full information regarding the number of units purchased at each separate price will be made available.

Date

Expiration

2. This Form 4 is being amended and refiled to correct the inadvertent selection of "D" in Table 1, Column 4 in the Form 4 reporting these unit purchases, which was filed with the Securities and Exchange Commission on October 1, 2015. The correct selection to reflect the purchase of the 1,000 units is "A."

Remarks:

/s/ Michelle S. Miller, as Attorney-in-Fact for Mary Rose Brown

Shares

10/05/2015

Title

** 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 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.