Edgar Filing: Atlas Resource Partners, L.P. - Form 4

Atlas Resource Partners, L. Form 4 May 02, 2012	Р.									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 O Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Example of the section 16.							N OMB Number: Expires: Estimate burden h response	•		
(Print or Type Responses)										
1. Name and Address of Reportin COHEN JONATHAN Z	ner Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
(Last) (First)		Atlas Resource Partners, L.P. [ARP] 3. Date of Earliest Transaction				(Che	eck all applica	ble)		
1845 WALNUT STREET, FLOOR	h/Day/Year) D/2012				X Director 10% Owner X Officer (give title Other (specify below) below) Vice Chairman					
			mendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person			
PHILADELPHIA, PA 19103 — Form filed by More than One Reporting Person										
(City) (State)	(Zip) Ta	able I - Non-	Derivative S	ecuri	ties Acc	uired, Disposed	of, or Benefic	ially Owned		
1.Title of Security (Instr. 3)2. Transaction Da (Month/Day/Year)		Date, if Transaction(A) or Disposed of (D) S Code (Instr. 3, 4 and 5) B y/Year) (Instr. 8) C (A) T (A) T			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 04/30/2012 Units		Р	50,000	А	\$ 20 (1)	59,638 <u>(2)</u>	D			
Common 04/30/2012 Units		Р	150,000	А	\$ 20 (1)	270,344 <u>(2)</u>	I	By Foundation		
Common Units						6,869 <u>(2)</u>	Ι	By Trust (4)		

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 (9-02)

Edgar Filing: Atlas Resource Partners, L.P. - Form 4

displays a currently valid OMB control number.

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
COHEN JONATHAN Z 1845 WALNUT STREET, 10TH FLOOR PHILADELPHIA, PA 19103	Х		Vice Chairman				
Signatures							
/s/ Lisa Washington, Attorney-In-Fact	05/02/202	12					
**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).

- (1) The reporting person purchased the common units in a private placement transaction.
- (2) In connection with the issuer's spin-off from Atlas Energy,L.P. ("ATLS"), the issuer's common units were distributed to ATLS unitholders using a ratio of 0.1021 to 1. The reporting person's units set forth in this report have been adjusted accordingly.
- (3) The reporting person is a co-trustee of Arete Foundation, a charitable foundation. The reporting person disclaims beneficial ownership to these units.
- (4) The reporting person is a co-trustee and co-beneficiary of the trust.

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.