FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasiiiigton,	D.C. 20049	

OMB A	PPROVAL
OMB Number:	3235-028

37 Estimated average burden hours per response: 0.5

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(h) of the Investment Company Act of 1940

	nd Address of	f Reporting Person *			PO		RES		ker or Tra		Symbol PARTN	ER!	SHIP		heck all ap	ctor	J	10% (ssuer Owner (specify
	,	SENERAL ELEC	Middle)	CO.	3. Date of Earliest Transa 09/28/2018										belo	Officer (give title below)		below	·)``
(Street)	AND O	R 9	97204		4. If	Ame	ndment	, Date o	of Origina	al File	d (Month/Da	ny/Yea	r)		ne) <mark>X</mark> For	or Joint/Gro m filed by O m filed by M son	ne Rep	orting Per	son
(City)	(S		Zip)																
			le I - No			_			-	, Dis	posed o	-							
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		E> if:	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)				Benefic	ies :ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A)	or F	Price		ction(s)			(
Limited P	artnership	Units		09/28/	2018				A		120		A	\$72.5	30),509		D	
Limited P	artnership	Units													60),000			By a trust ⁽¹⁾
Limited Partnership Units														23	9,317		I	By a limited liability company ⁽²⁾	
Limited P	nited Partnership Units												2	21,212			By a trust ⁽³⁾		
		Та									osed of, onvertib				/ Owned]			
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year)		on Date,		Transaction Code (Instr.		umber vative urities uired or osed) r. 3, 4	6. Date Expirati (Month/	on Da	te Ar ear) Se Ur De Se		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly [10. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amo or Nun of Sha	ber					

Explanation of Responses:

- 1. Represents units held by a trust of which the reporting person is a trustee and shares voting and dispositive power. The reporting person disclaims beneficial ownership of securities held in such trust except to the extent of her pecuniary interest therein.
- 2. Represents units owned by a limited liability company of which the reporting person is a managing member. The reporting person disclaims beneficial ownership of securities owned by such limited liability company except to the extent of her pecuniary interest therein.
- 3. Represents units held by a trust for reporting person's children for which reporting person holds voting and dispositive power by virtue of her position with the trust. The reporting person disclaims beneficial ownership of securities owned by such trust except to the extent of her pecuniary interest therein.

Remarks:

Sean M. Tallarico, Power of Attorney for Maria M. Pope

10/01/2018

** Signature of Reporting Person

Date

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.