FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number:

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)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Casadaban Rene L (Last) (First) (Middle) C/O SUMMIT MIDSTREAM PARTNERS, LP 1790 HUGHES LANDING BLVD., SUITE 500						Issuer Name and Ticker or Trading Symbol Summit Midstream Partners, LP [SMLP] 3. Date of Earliest Transaction (Month/Day/Year) 09/28/2015										Relationship of Reporting Person(s) to Issuer heck all applicable) Director 10% Owner X Officer (give title below) See Remarks					
(Street) THE WOODLANDS (City) (State) (Zip) Table I - Non-Deriva						4. If Amendment, Date of Original Filed (Month/Day/Year) ative Securities Acquired, Disposed of, or Benefic										ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ır) E	any	med on Date, Day/Yea	Cod	sactio e (Insti	n Dis	<u> </u>			4 and Securitie Benefici Owned F		es ally Following d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Cod	e V	Am	ount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)					
Common Units 09/28/						2015			M		8	8,750	A	(1)		11,336		D			
Common Units 09/28/												323	D \$16.		76	5 11,013			D		
		Ta											or Bendale secu		y Own	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transactior Code (Instr. 8)		of Deri Sec Acq (A) o Disp of (I	oosed D) tr. 3, 4	6. Date Expira (Month	tion Da	te	ar) Am Sec Und Dei		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expira Date	ation	Title	Amount or Number of Shares	1						
Phantom Units	(1)	09/28/2015			M			8,750	(2)		(3	3)	Common Units	8,750	\$0		0		D		
Distribution Equivalent Rights	\$5.46	09/28/2015			D			8,750	(2))	(3	3)	Common Units	8,750	\$(0		D		

Explanation of Responses:

- 1. Each phantom unit is the economic equivalent of one common unit.
- 2. All phantom units subject to the original award agreement vested on September 28, 2015. The Reporting Person received distribution equivalent rights (DERs) for each phantom unit, providing for payment on the vesting date of a lump sum of cash equal to the accrued distributions from and after the grant date of the phantom units.
- 3. The phantom units do not expire. The phantom units are settled upon vesting in common units (on a one-for-one basis) or in cash, at the discretion of the Issuer.

Remarks:

At the time of the reported transaction, the Reporting Person was Senior Vice President and Chief Operations Officer of Summit Midstream GP, LLC, the general partner of the Issuer (the "General Partner"). The Issuer is managed by the directors and executive officers of the General Partner.

/s/ Brock M. Degeyter,

Attorney-in-Fact for Rene L. 09/30/2015

Casadaban

** 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.