

## **OCI RESOURCES LP**

# Reported by **DUCEY MICHAEL E**

### FORM 3

(Initial Statement of Beneficial Ownership)

### Filed 09/11/14 for the Period Ending 09/10/14

Address FIVE CONCOURSE PARKWAY

**SUITE 2500** 

ATLANTA, GA 30328

Telephone 770-375-2300

CIK 0001575051

Symbol OCIR

Fiscal Year 12/31





# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response... 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 *  DUCEY MICHAEL E	Statement (MM/DD	t	iiring	3. Issuer Nam OCI Resou				I
(Last) (First) (Middle)	4. Relatio	nship of Rep	porting	g Person(s) to 1	Issuer (	Check all app	plicable)	
C/O OCI RESOURCES LP, FIVE CONCOURSE PARKWAY, SUITE 2500	X Dire	ector er (give title belo	ow)		Owner specify be	low)		
(Street)  ATLANTA, GA 30328  (City) (State) (Zip)	5. If Ame Original I (MM/DD/YY		te	6. Individual  _ X _ Form filed by	by One Re	_	_	cable Line)
	Table I - N	Non-Deriva	tive S	ecurities Bene	ficially	Owned		
1.Title of Security (Instr. 4)		2. Amo Benefic (Instr. 4	cially	f Securities Owned	3. Owne Form: (D) or Indire (Instr.	rship Owr Direct (Inst	ership	rect Beneficial
Table II - Derivative Secu	ırities Benef	icially Own	ed ( <i>e</i> .	g. , puts, calls	, warra	nnts, options	, convertible	e securities)
1. Title of Derivate Security (Instr. 4)	2. Date Exer and Expirati (MM/DD/YYY	ion Date	Secu	le and Amount of ities Underlying ative Security		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or No of Shares	umber		or Indirect (I) (Instr. 5)	

#### **Explanation of Responses:**

#### Remarks:

Exhibit 24 - Power of Attorney

No securities are beneficially owned.

**Reporting Owners** 

Paparting Owner Name / Address		Relationsh	ips	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
DUCEY MICHAEL E C/O OCI RESOURCES LP FIVE CONCOURSE PARKWAY, SUITE 2500	X			

ATLANTA, GA 30328		
Signatures		
/s/ Nicole C. Daniel, as attorney-in-fact	9/10/2014	

\*\* Signature of Reporting Person

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

Date

- \* If the form is filed by more than one reporting person, see Instruction 5(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 control number.

#### LIMITED POWER OF ATTORNEY FOR SECTION 16 REPORTING OBLIGATIONS

Know all by these present, that the undersigned hereby makes, constitutes and appoints Nicole C. Daniel and Derek B. Swanson as the undersigned's true and lawful attorney-in-fact, with full power and authority as hereinafter described on behalf of and in the name, place and stead of the undersigned to:

- (1) prepare, execute, acknowledge, deliver and file Forms 3, 4, and 5 (as applicable, including any amendments thereto) with respect to the securities of OCI Resources LP, a Delaware limited partnership (the "Partnership"), with the United States Securities and Exchange Commission, any national securities exchanges and the Partnership, as considered necessary or advisable under Section 16(a) of the Securities Exchange Act of 1934 and the rules and regulations promulgated thereunder, as amended from time to time (the "Exchange Act");
- (2) seek or obtain, as the undersigned's representative and on the undersigned's behalf, information on transactions in the Partnership's securities from any third party, including but not limited to brokers, employee benefit plan administrators and trustees, and the undersigned hereby authorizes any such third party to release any such information to the undersigned and approves and ratifies any such release of information to the undersigned; and
- (3) perform any and all other acts which in the discretion of such attorney-in-fact are necessary or desirable for and on behalf of the undersigned in connection with the foregoing.

The undersigned acknowledges that:

- (1) this Limited Power of Attorney authorizes, but does not require, such attorney-in-fact to act in her discretion on information provided to such attorney-in-fact without independent verification of such information;
- (2) any documents prepared and/or executed by such attorney-in-fact on behalf of the undersigned pursuant to this Limited Power of Attorney will be in such form and will contain such information and disclosure as such attorney-in-fact, in her discretion, deems necessary or desirable:
- None of the Partnership, the general partner of the Partnership, OCI Resource Partners LLC, or such attorney-in-fact assumes (i) any liability for the undersigned's responsibility to comply with the requirements of the Exchange Act, (ii) any liability of the undersigned for any failure to comply with such requirements, or (iii) any obligation or liability of the undersigned for profit disgorgement under Section 16(b) of the Exchange Act; and
- (4) this Limited Power of Attorney does not relieve the undersigned from responsibility for compliance with the undersigned's obligations under the Exchange Act, including without limitation, the reporting requirements under Section 16 of the Exchange Act.

The undersigned hereby gives and grants the foregoing attorney-in-fact full power and authority to do and perform all and every act and thing whatsoever requisite, necessary or appropriate to be done in and about the foregoing matters as fully to all intents and purposes as the undersigned might or could do if present, hereby ratifying all that such attorney-in-fact of, for and on behalf of the undersigned, shall lawfully do or cause to be done by virtue of this Limited Power of Attorney.

This Limited Power of Attorney shall remain in full force and effect until revoked by the undersigned in a signed writing delivered to such attorney-in-fact.

IN WITNESS WHEREOF, the undersigned has caused this Limited Power of Attorney to be executed as of this 9th day of September 2014.

/s/ Michael E. Ducey Michael E. Ducey

#### STATE OF SOUTH CAROLINA

#### **COUNTY OF BEAUFORT**

On this 9th day of September, 2014, Michael E. Ducey personally appeared before me, and acknowledged that she executed the foregoing instrument for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

Signature: /s/	/ Ellen D. Padge	ett	
My Commissio	on Expires:	11/04/2019	