SHACKOULS BOBBY S

Form 4

August 16, 2018

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

January 31, 2005

0.5

burden hours per

response...

Estimated average

OMB APPROVAL

if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

may continue. See Instruction

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

| SHACKOU | PLAII | Symbol PLAINS ALL AMERICAN | | | | Issuer (Check all applicable) | | | | | |
|---|--|----------------------------|--|-------------|--------|---|---|---|--------------------------------|--|--|
| (I () | (F' A) (M. | | PIPELINE LP [PAA] | | | | | | | | |
| | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | X Director 10% Owner Officer (give title Other (specify | | | | |
| 333 CLAY 5 | | 08/14/2018 | | | | below) below) | | | | | |
| | (Street) 4. If Amen | | | ate Origina | l | | 6. Individual or Joint/Group Filing(Check | | | | |
| | | Filed(M | Filed(Month/Day/Year) | | | | Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| HOUSTON, TX 77002 | | | | | | | Form filed by More than One Reporting Person | | | | |
| (City) | (State) (Z | Zip) Ta | ble I - Non-l | Derivative | Securi | rities Acquired, Disposed of, or Beneficially Owned | | | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) Execution Date any (Month/Day/Year) | | Code Disposed of (D) | | | Beneficially (D) or Bene Owned Indirect (I) Own Following (Instr. 4) (Instr Reported Transaction(s) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | Code V | / Amount | | Price | (Instr. 3 and 4) | | | | |
| Common Units | 08/14/2018 | | M | 3,750 | A | \$ 0 | 3,750 | D | | | |
| Common Units | | | | | | | 10,016 | I | By 2018 GRAT | | |
| Common Units | | | | | | | 10,017 | I | By Spouse's 2018 GRAT | | |
| 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

SEC 1474

(9-02)

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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) | 4. Transactic Code (Instr. 8) | 5. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Pri Deriv Secur (Instr |
|---|---|---|--|--|--|--------------------|---|--|------------------------------------|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Phantom Units | <u>(1)</u> | 08/14/2018 | M | 3,750 | (2) | (3) | Common Units | 3,750 | \$ |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| SHACKOULS BOBBY S 333 CLAY STREET, SUITE 1600 HOUSTON, TX 77002 | X | | | | | |

Signatures

/s/ Ann F. Gullion, as attorney-in-fact for Bobby S.
Shackouls

08/16/2018

**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) One common unit is deliverable, upon vesting, for each phantom unit that vests.
- (2) Phantom Units vest annually on August distribution date.
- (3) Upon termination of service as director, other than because of death or disability.

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.

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