FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	DVAL						
	OMB Number:	3235-0287						
l	Estimated average burden							
l	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

1. Name and Address of Reporting Person* SINNOTT ROBERT V	2. Issuer Name and Ticker or Trading Symbol PLAINS ALL AMERICAN PIPELINE LP PAA PAA							(Chec	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) (First) (Middle) 1800 AVENUE OF THE STARS, 3RD FLR		3. Date of Earliest Transaction (Month/Day/Year) 10/18/2019								Offic belov	er (give title v)		Other (specify below)	
(Street) LOS ANGELES CA 90067-42	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line) X	X Form filed by One Reporting Person Form filed by More than One Reporting					
(City) (State) (Zip)										Pers				
1. Title of Security (Instr. 3) 2. Tran- Date					quired, Disposed of, or Benefic  3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 2			A) or	) or 5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	Amount	(A (D	() or ()	Price	Transa	action(s) 3 and 4)		(mean )	
Common Units	10/18/2019			G		20,428		D	\$0	30,428		D		
Common Units	10/18/2019			G		19,977		D	\$0	174,780		I	By Family Trust	
Common Units	10/18/	/2019		A		20,203		A	\$0	20,203		I	By 2019 GRAT	
Common Units	10/18/	/2019		A		20,202	2	A	\$0	2	0,202	I	By Spouse's 2019 GRAT	
Common Units								54,140		I	By GRAT			
Common Units								54		4,140	I	By Spouse's GRAT		
			urities Acqui s, warrants, d							wned				
Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any	vative rity or Exercise (Month/Day/Year)   Execution Date, or Exercise (Month/Day/Year)   Execution Date, or Code (In (Month/Day/Year)   8)					te Amount of		Der Sed (Ins	rice of ivative urity tr. 5)	ve derivative Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
Evnlanation of Responses:		Code V		Date Exercisal		Expiration Date	Title	Amou or Numb of Share	er					

Remarks:

/s/ Robert V. Sinnott

10/18/2019

\*\* 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.