## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasinigton,	D. C.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

.C. 20549	OMB APPROVAL

OMB Number: 3235-0287 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

								,												
1. Name and Address of Reporting Person*  SYMONDS J TAFT						2. Issuer Name <b>and</b> Ticker or Trading Symbol PLAINS ALL AMERICAN PIPELINE LP									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>DIMORDO J IIII I</u>													X	Directo	r	10% Own		wner		
				AA]							Officer (give title Other (specify									
(Last)	(Fi	irst)	(Middle)		3.1	Date (	of Earlies	st Transa	action (M	onth/	Day/Year)				below)			below)		
2001 KII	RBY DRIV	E, # 1001			08	/14/2	2012													
					-			_												
(Street)					_   4.	If Ame	endment	, Date o	f Original	Filed	(Month/Da	y/Year)		6. Ind Line)	ividual or J	oint/Group	Filing	(Check A	plicable	
HOUST	ON T	v	77019									- 1	X Form filed by One Reporting Person							
1100310	JIN 12	A	//013										, , ,							
					-								Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)																	
		Tal	ole I - No	n-Deri	vativ	e Se	curitie	es Acc	uired.	Dis	posed o	f. or Ber	nefici	iallv	Owned					
1 Title of 6	Coourity (Inot			2. Trans		_			3.		1				1	of	6 Owr	perchin	7. Nature of	
1. Title of s	Security (Inst	tr. 3)		Date			(Month/Day/Year)						s Acquired (A) or of (D) (Instr. 3, 4 an				6. Ownership Form: Direct		Indirect	
				(Month	/Day/Ye				Code (Instr. 8)		5)				Beneficially Owned Following		(D) or Indirect (I) (Instr. 4)		Beneficial Ownership	
						- 1						T	1		Reported		(,, (,		(Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	е	Transaction(s) (Instr. 3 and 4)					
	TT 1.			00/4	1/001				1		2.500	+	+							
Common	Common Units			08/14/2012					M		2,500	A	\$	50 27,5		00		D		
																			Symonds	
													1						Trust	
Common	Units												1		10,000		I		Company,	
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									1 1 1				1						A.	
Common Units													1		2,300		I		Symonds	
													1						Revocable	
																Trust				
			Table II -	Doriv	ativo	Soc	uritios	Λcαι	uired C	)ien	osed of	or Rene	ficia	llv C	Jwned					
											convertik				JWIIEU					
1. Title of	2.	4			_	6. Date Exercisable and 7. Title and					_	8. Price of	9. Number of		10.	11. Nature				
Derivative Conversion Date Execution D				Date,	Transa	action Derivative I		Expiration Date Amount of			f	Derivative Security (Instr. 5)		derivative		Ownershi	of Indirect			
Security or Exercise (Month/Day/Year) if any (Instr. 3) Price of (Month/Day/Year)					Code (Insti		tr. Securities Acquired (A)		(Month/Day/Year)					Securities Underlying		Securities Beneficially		Form: Direct (D)	Beneficial Ownership	
(	Derivative										Derivative	Secur	urity		Owned	´	or Indirect (Instr.	(Instr. 4)		
	Security											nd 4)			Following Reported		(I) (Instr. 4)	)		
			+					Amo		ount		Transaction(s) (Instr. 4)		1 1	1					
													or			(1115(1.4)			1	
									Date		Expiration		Numb of	ber					1	
					Code	v	(A)	(D)	Exercisa			Title	Share	es					1	
Phantom							1							$\dashv$	$\overline{}$					
Units-																			1	
Long Term	(1)	08/14/2012			M			2,500	(2)		(3)	Common Units	2,50	00	\$ <mark>0</mark>	7,500	0	D	1	
Incentive												Units							1	
Plan																				
Phantom																				
Units-												Common							1	
Long Term	(1)	08/14/2012			A		2,500		(2)		(3)	Common Units	2,50	00	\$0	10,00	00	D	1	
Incentive																			1	
Plan																				

#### Explanation of Responses:

- $1. \ One \ Common \ Unit \ is \ deliverable, \ upon \ vesting, \ for \ each \ phantom \ unit \ that \ vests.$
- 2. 2,500 phantom units vest annually on August distribution date, with automatic re-grant of equivalent amount.
- 3. Upon termination of service as director, other than because of death, disability or retirement.

## Remarks:

/s/ J. Taft Symonds

08/14/2012

\*\* 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.