Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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| |

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

| Name and Address of Reporting Person* vonBerg John | | | | | 2. Issuer Name and Ticker or Trading Symbol PLAINS ALL AMERICAN PIPELINE LP [PAA] | | | | | | | | | | ck all applic Directo | able) r (give title | g Person(s) to Issi 10% Ov Other (s | | vner |
|--|---|--|--|---------|---|---|-------|--------------------------------|------------------------------------|-------|----------------------|--|--|-------------------------|--|---|---|--|--|
| (Last) 333 CLA | (Fi Y STREET | * | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2014 | | | | | | | | | | | nercia | below) al Activiti | es |
| (Street) | ON T | X | 77002 | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Inc Line) | ividual or Joint/Group Filing (Check App Form filed by One Reporting Person Form filed by More than One Report Person | | | | ı |
| (City) | (Si | tate) | (Zip) | | | | | | | | | | | | . 0.00 | | | | |
| | | Tab | le I - No | n-Deri\ | /ativ | e Se | curit | ies Ac | quired | , Dis | posed o | f, or I | 3ene | ficially | Owned | l | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | | ar) l | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 5) | | | | | 5. Amou Securitie Benefici Owned F Reporte | es ally Following | Form (D) o | n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A (D | or | Price | Transaci (Instr. 3 | tion(s) | | | (111511. 4) |
| Common Units | | | 05/15/2014 | | 4 | | | М | | 36,00 |) A | A | \$ <mark>0</mark> | 158 | 3,359 | D | | | |
| Common | Units | | | 05/15 | 5/201 | 4 | | | F | | 15,10 | 2 | D | \$56.93 | 143,257 D | | | | |
| | | - | Table II - | | | | | | | | osed of, converti | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | 4. Transa Code (8) | | n of | | 6. Date E Expiratio (Month/E | n Dat | | 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4) | | curity | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transactio (Instr. 4) | is Blly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Co | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nu of | ımber | | | | | |
| Phantom Units | (1) | 05/15/2014 | | T | M | | | 36,000 | 05/15/20 | 014 | (2) | Comm | | 5,000 | \$0 | 36,000 |) | D | |

Explanation of Responses:

- 1. 1-for-1 Common Units for Phantom Units granted under long-term incentive plan.
- 2. N/A

Remarks:

/s/ John vonBerg

05/15/2014

** 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.