FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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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* <u>Mirosh Walentin</u>						2. Issuer Name and Ticker or Trading Symbol TC PIPELINES LP [ TCP ]							Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				
(Last) (First) (Middle) 717 TEXAS STREET, SUITE #2400					3. Date of Earliest Transaction (Month/Day/Year) 11/14/2012								Officer (give title Other (specify below) below)				pecify
(Street) HOUSTON NE 77002 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transar Date (Month/Date)					Execution Date,			3. Transaci Code (In	3. 4. Secul Transaction Dispose Code (Instr. 5)		of, or Beneficia urities Acquired (A) or sed Of (D) (Instr. 3, 4 and		5. Amour Securitie Beneficia Owned F	s Ily ollowing	Form	Direct III	7. Nature of Indirect Beneficial Ownership
							Code	v A	Amount	(A) or (D)	Price		Reported Fransaction(s) Instr. 3 and 4)			(Instr. 4)	
			Table II - D (e								f, or Bene ible secui		Owned				
Derivative Conversion Date Executive Security or Exercise (Month/Day/Year) if any			3A. Deemed Execution Dai if any (Month/Day/Yo	Date, Transactio Code (Inst		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		e and	7. Title and Amoun Securities Underlyi Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Cod	e V	(A)		Date Exercisable	Expir Date	ration	Title	Amount or Number of Shares					
Deferred Share Units	(1)	11/14/2012		A		96 <sup>(3)</sup>		(2)	(:	(2)	Common Units representing limited partner interest	96	\$40.63 <sup>(3)</sup>	5,079	)	D	

## **Explanation of Responses:**

- 1. Upon termination of service as a director, Deferred Share Units ("DSUs") recorded in the reporting person's account will be settled, at the reporting person's election, in common units of TC PipeLines, LP ("Common Units") at no additional cost on a 1 for 1 basis or in cash of equivalent value, less applicable withholdings.
- 2. The DSUs are immediately fully vested and are redeemable only following Mr. Mirosh's termination of Board service.
- 3. The DSUs were credited to the director's share unit account as distributions, effective on the payment date for distributions paid by TC PipeLines, LP on the Common Units. Pursuant to the Share Unit Plan for Non-Employee Directors (2007), the number of DSUs credited for distributions is calculated based on the distribution declared and paid on Common Units multiplied by the number of DSUs in the director's share account on the record date of such distribution, divided by the fair market value of Common Units on the payment date for such distribution.

## Remarks:

/s/ Annie C. Belecki, by Power of Attorney for Walentin

11/15/2012

Mirosh

\*\* 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.