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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

1. Name and Address of Reporting Person [*] JENKINS-STARK JACK			2. Issuer Name and Ticker or Trading Symbol <u>TC PIPELINES LP</u> [TCLP]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner
(Last) 13710 FNB I	ast) (First) (Middle) 3710 FNB PARKWAY		3. Date of Earliest Transaction (Month/Day/Year) 03/31/2009	Officer (give title Other (specify below) below)
(Street) OMAHA NE 68154-5200 (City) (State) (Zip)			4. If Amendment, Date of Original Filed (Month/Day/Year)	 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-Der	ivative Securities Acquired, Disposed of, or Bene	eficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a 5)			Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)

 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Deferred Share Units	(1)	03/31/2009		A		252		(2)	(2)	Common units representing limited p/ship interests	252	(3)	3,287	D	

Explanation of Responses:

1. N/A - Upon termination of board service, Common Units representing limited partnership interests may be purchased on the open market on behalf of Mr. Jenkins-Stark whereby he would receive Common Units in a number equal to the number of Deferred Share Units ("DSUs") recorded in his account less any applicable withholdings. Alternatively, Mr.Jenkins-Stark may elect to receive the value of his DSU entitlement in cash. The cash payment amount shall be determined by multiplying the number of DSUs recorded in his account by the Fair Market Value of a Common Unit less any applicable withholdings. 2. N/A - the DSUs are fully vested and are redeemable only following Mr. Jenkins-Stark's termination of Board service.

3. Mr. Jenkins-Stark elected to have a portion (50%) of his annual retainer paid in the form of DSUs in lieu of cash. The number of DSUs is calculated based on the Fair Market Value of the Common Units representing limited partnership interests.

Remarks:

<u>/s/ Donald J. DeGrandis,</u> <u>Attorney for Jack Jenkins-Stark</u>

04/02/2009

** 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.