FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
	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

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1. Name and Address of Reporting Person* <u>Mirosh Walentin</u>							2. Issuer Name and Ticker or Trading Symbol TC PIPELINES LP [TCP]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
																Directo	r		10% Ov	vner	
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 08/14/2012										(give title		Other (s below)	pecify	
717 TEX	AS STREE																				
		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable									
(Street)						(Line) X Form filed by One Reporting Person						
		77002													Form fi	Form filed by One Reporting Person					
TIOUSTON INE		,,,,,													ed by More than One Reporting			ting			
(City) (State) (Zi			(Zip)		Person																
		Tal	ole I - Non	-Deriv	ativ	e Se	curiti	es A	cqu	ired, D	isp	osed	of, or Ber	eficia	ally (Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date,			e,	Transaction Dispos Code (Instr. 5)			rities Acquired ed Of (D) (Insti		and Securitie Beneficia Owned F		s lly ollowing	Form	Direct Indirect I	7. Nature of Indirect Beneficial Ownership	
									Code \	,	Amoun	nt (A) or Pri			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
													f, or Bene			wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	ate, Ti	Code (Insti		n of Ex			Date Exercisable and xpiration Date And Xpiration Date Month/Day/Year)			7. Title and A Securities U Derivative Se (Instr. 3 and			9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e Over State of	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				c	ode	v	(A)	(D)	Date Exer	cisable	Exp Date	iration e	Title	Amou or Numb of Share	er						
Deferred Share Units	(1)	08/14/2012			A		82 ⁽³⁾			(2)		(2)	Common Units representing limited partner interest	82	\$	\$46.37 ⁽³⁾	4,983	3	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

Attorney for Walentin 08/15/2012

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.