SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	r Sect	on 30(n) of ti	he Inv	/estment	Con	npany A	ct of 1	940									
1. Name and Address of Reporting Person* Mirosh Walentin						2. Issuer Name and Ticker or Trading Symbol TC PIPELINES LP [TCP]											5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						_			_	_ L						X	Directo	r		10% Ov	wner		
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 03/31/2020											Officer below)	(give title		Other (: below)	specify		
700 LOUISIANA STREET																							
							4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)																X Form filed by One Reporting Person							
HOUSTON TX 77002-2			77002-270	2700												,	More than One Reporting						
																Person				g			
(City) (State) (Zip)																							
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						ear)	2A. Deemed Execution Date if any (Month/Day/Ye		· ·	e, Transaction Code (Instr.			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			and Securitie Beneficia Owned F		s F ally (i following (i	Form (D) or	6. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code		Amount (A) or (D)		Price	Tr	eported ransacti	ion(s)			(Instr. 4)				
									Coue	v			(D)	FILE	()	nstr. 3 a	and 4)						
			Table II - I	Deriva	tive	Sec	uritie	s Ac	qui	red, Di	spc	osed c	of, or	Bene	ficially	Owi	ned						
			((e.g., p	outs,	call	s, wa	ırran	ts, c	options	s, c	onver	tible	secur	ities)								
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. Transactior Code (Instr. 8)		of Deriv Secu Acqu (A) of Dispo of (D)	r osed) r. 3, 4	Exp	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun Securities Underlyi Derivative Security (Instr. 3 and 4)			ng Derivative Security (Instr. 5)		9. Numbe derivative Securities Beneficia Owned Following Reported Transactii (Instr. 4)	e s Illy J	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
				c	Code	v	(A)	(D)	Date	e rcisable	Exp Dat	piration e	Title		Amount or Number of Shares								
Deferred														nmon nits									

Explanation of Responses:

(1)

Share Units

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 representing a limited partner interest in TC PipeLines, LP ("Common Units") at no additional cost on a 1 for 1 basis or in cash of equivalent value, less any applicable withholdings.

(2)

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2. The DSUs are immediately fully vested and are redeemable only following Mr. Mirosh's termination of Board service.

3. Represents the automatic grant of DSUs made to Mr. Mirosh on a quarterly basis as part of his annual board compensation. The number of DSUs is calculated based on the Fair Market Value of the Common Units on the last trading day of the quarterly payment period.

/s/ Jon A. Dobson, Attorney-in-04/02/2020

\$27.48⁽³⁾

21,814

D

Fact for Walentin Mirosh

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representing limited

partner interes

(2)

** 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).

03/31/2020

** 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.

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

3235-0287 Estimated average burden hours per response: 0.5