## 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).

1. Name and Address of Reporting Person\* Plains All American GP LLC

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

					or Se	ction	30(h) c	of the li	nvestme	nt Coi	mpany Act o	of 194	00						
	nd Address of P Holdin	f Reporting Person*				MIA			er or Tr MER		Symbol N PIPE	LIN	E L		k all app	,	ng Pers	son(s) to I	
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1. Title of	Security (Ins	tr. 3)		2. Transac Date (Month/Da		Exe if ar	Deeme ecution l ny onth/Day	Date,	3. Transa Code ( 8)		4. Securitie Disposed ( 5)				5. Amo Securit Benefic Owned Report	ies cially Following	Form:	nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	٧	Amount	(A (D	) or )	Price	Transa	ction(s) 3 and 4)			(msu. 4)
Common	Units (Lim	nited Partner Inte	rests)	08/14/2	2024				A <sup>(1)</sup>		202,002	2	A	<b>\$0</b> <sup>(1)</sup>	232,	855,930		Ι	By Plains AAP, L.P. <sup>(2)</sup>
		Tal	ble II -								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code (I 8)		of Deriv Secu Acqu (A) o Disp of (D	osed ) r. 3, 4	6. Date Expirat (Month	ion Da		Amo Sec Und Deri	tle an ount o urities erlyin vative urity ( d 4)	of De S Se og (In	Price of erivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y G	0. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownershi (Instr. 4)
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	nd Address of P Holdin	f Reporting Person*					'												
(Last) 333 CLA SUITE 1	AY STREE	(First)	(Mi	ddle)															
(Street)	ON	TX	770	002															
(City)		(State)	(Zip	o)															
	nd Address of AAP, L.P	f Reporting Person*																	
(Last) 333 CLA SUITE 1	AY STREE	(First)	(Mi	ddle)															
(Street)	ON	TX	770	002															
(City)		(State)	(Zip	o)															

(Last)	(First)	(Middle)	
333 CLAY STR	, ,	()	
SUITE 1600			
(Street)			
HOUSTON	TX	77002	
(City)	(State)	(Zip)	
	ess of Reporting Person HOLDINGS I		
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(Last) 333 CLAY STR	, ,	(Middle)	
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333 CLAY STR	, ,	(Middle)	
333 CLAY STR SUITE 1600	, ,	(Middle) 77002	

### **Explanation of Responses:**

1. Pursuant to that certain Omnibus Agreement (the "Omnibus Agreement") dated November 15, 2016, by and among PAA GP Holdings LLC ("PAGP GP"), Plains GP Holdings, L.P. ("PAGP"), Plains All American GP LLC ("GP LLC"), Plains AAP, L.P. ("AAP"), PAA GP LLC and Plains All American Pipeline, L.P. ("PAA"), AAP is obligated to issue to PAGP a number of AAP Class A units equal to the number of PAGP Class A shares issued upon vesting of awards under PAGP's long-term incentive plan. The Omnibus Agreement also provides that immediately following such issuance, PAA is obligated to issue to AAP an equivalent number of PAA Common Units. On August 14, 2024, a total of 202,002 PAGP Class A shares were issued in connection with the vesting of outstanding LTIP awards under PAGP's long-term incentive plan. An equal number of AAP Class A units was issued to PAGP and an equal number of PAA Common Units was issued to AAP.

2. PAGP GP is the general partner of PAGP, which is the managing member of GP LLC, which is the general partner of AAP. Each of PAGP GP, PAGP and GP LLC may be deemed to indirectly beneficially own the Common Units directly held by AAP, but disclaim beneficial ownership of such Common Units except to the extent of their respective pecuniary interests therein.

/s/ Ann F. Gullion, Assistar Secretary

08/15/2024

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.