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TRAVELCENTERS OF AMERICA LLC

Form 4

December 09, 2015

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL

OMB Number:

> January 31, Expires: 2005

> > 10% Owner

3235-0287

Estimated average burden hours per response... 0.5

Check this box if no longer

subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Washington, D.C. 20549

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

Form 5

obligations

may continue.

See Instruction

(Print or Type Responses)

1. Name and Address of Reporting Person * O'BRIEN THOMAS M

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

TRAVELCENTERS OF AMERICA

(Check all applicable)

President and CEO

LLC [TA]

(Last) (First) (Middle)

(Month/Day/Year) 12/08/2015

X_ Officer (give title Other (specify below)

C/O REIT MANAGEMENT & RESEARCH LLC, TWO NEWTON PLACE 255 WASHINGTON **STREET**

(Street)

4. If Amendment, Date Original

(Instr. 8)

3. Date of Earliest Transaction

6. Individual or Joint/Group Filing(Check

Applicable Line)

_X__ Director

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

NEWTON, MA 02458

(City) (State) (Zip) 1.Title of 2. Transaction Date 2A. Deemed

any

(Month/Day/Year)

(Month/Day/Year)

3. 4. Securities Acquired Transaction(A) or Disposed of (D) Execution Date, if Code (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following

Reported

6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Indirect (I)

Ownership (Instr. 4)

(Instr. 4)

Transaction(s) (Instr. 3 and 4)

Common Shares

Security

(Instr. 3)

12/08/2015

Code Amount A 100,000 (D) Price

<u>(1)</u>

(A)

or

Α

1,771,190.5

D

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

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1

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exerc | cisable and | 7. Titl | le and | 8. Price of | 9 |
|-------------|-------------|---------------------|--------------------|--|------------|-------------------------------------|-------------|------------|--------------|-------------|---|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | on Date, if TransactionNumber Expiration Date Code of (Month/Day/Year) | | Expiration Date Amou | | int of | Derivative | J | |
| Security | or Exercise | | any | | | Year) | Underlying | | Security | , | |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | e | | Securities | | (Instr. 5) |] |
| | Derivative | | | Securities Acquired | | | (Instr | | 3 and 4) | | (|
| | Security | | | | | | | | | | J |
| | - | | | | (A) or | | | | | | J |
| | | | | | Disposed | | | | | | - |
| | | | | of (D) (Instr. 3, | | | | | | | (|
| | | | | | | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | | Amount | | |
| | | | | | | | | | Amount | | |
| | | | | | | Date Expiration Exercisable Date | Expiration | Title | or Number | | |
| | | | | | | | | of | | | |
| | | | | C-1- 1 | 7 (A) (D) | | | | | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

O'BRIEN THOMAS M C/O REIT MANAGEMENT & RESEARCH LLC TWO NEWTON PLACE 255 WASHINGTON STREET NEWTON, MA 02458

X President and CEO

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Signatures

/s/ Thomas M. 12/09/2015 O'Brien

**Signature of Date
Reporting Person

Explanation of Responses:

- * 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).
- (1) Transaction reported is grant of shares pursuant to issuer's equity compensation plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2