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TRAVELCENTERS OF AMERICA LLC

Form 4

Common

Shares

11/30/2016

December 01, 2016

FORM	1 4								PPROVAL	
_	Washington, D.C. 20549							OMB Number:	3235-0287	
Check th if no long	~~*							Expires:	January 31 2005	
subject to Section 1 Form 4 o	subject to Section 16. Form 4 or STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP (SECURITIES						NERSHIP OF	Estimated average burden hours per response 0.		
Form 5 obligatio may cont See Instru	ns Section 1'	7(a) of the	Public Ut	ility Hole	e Securities Ex ding Company Company Act	Act of	1935 or Section	on		
(Print or Type I	Responses)									
1. Name and A Myers Willi	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer					
			TRAVE		ERS OF AME	RICA	(Che	ck all applicable	e)	
(Last)	3. Date of Earliest Transaction (Month/Day/Year)				DirectorX Officer (giv below)		Owner er (specify			
NEWTON I	MR GROUP L PLACE 255 TON STREET	LC, TWO	11/30/20)16			/	ce President and	I CAO	
	4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
NEWTON,	MA 02458						Form filed by l Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-I	Derivative Securit	ties Acqu	uired, Disposed o	of, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execution any	med on Date, if Day/Year)	3. Transacti Code (Instr. 8)	4. Securities Acon(A) or Disposed (D) (Instr. 3, 4 and 5)	d of 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	

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

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 control number.

SEC 1474

(9-02)

(Instr. 3 and 4)

D

47,132

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

Code V Amount

20,000

A

or

(D)

Price

(1)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed		ate	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans
				of (D) (Instr. 3, 4, and 5)						(Instr
				4, and 3)	Date	Expiration		Amount		
			Code V	(A) (D)	Exercisable	Date	Title	Number of Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Myers William Earnest C/O THE RMR GROUP LLC TWO NEWTON PLACE 255 WASHINGTON STREET NEWTON, MA 02458

Senior Vice President and CAO

Signatures

/s/ William E.

Myers 12/01/2016

**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