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TRAVELCE Form 4 May 14, 2010	NTERS OF A	MERICA L	LC									
FORM									OMB AI	PROVAL		
	UNITE	Washington, D.C. 20549							OMB Number:	3235-0287		
Check this if no long subject to Section 16 Form 4 or	er STATI 5.	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: January 31 200 Estimated average burden hours per		
Form 5 obligation may conti <i>See</i> Instru- 1(b).	Filed p s Section 1	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							response	0.5		
(Print or Type R	esponses)											
1. Name and Ad O BRIEN TH	2. Issuer Symbol	Name and '	Ticker or T	rading	5	5. Relationship of Reporting Person(s) to Issuer						
			TRAVELCENTERS OF AMERICA LLC [TA]					(Check all applicable)				
(Mont				e of Earliest Transaction h/Day/Year) 3/2010				X Director 10% Owner X Officer (give title Other (specify below) below) President and CEO				
			mendment, Date Original Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 					
NEWTON, N	MA 02458							Form filed by M Person	Iore than One Re	porting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Execution any	med on Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V		sposed	of	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common shares	05/13/2010			А	11,000	А	<u>(1)</u>	678,690.5	D			

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Other			
O BRIEN THOMAS M C/O REIT MANAGEMENT & RESEARCH LLC 400 CENTRE STREET NEWTON, MA 02458		Х		President and CEO				
Signatures								
/s/ Thomas M. O'Brien	05/13/2010							

**Signature of

Reporting Person

Date

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.