

TRAVELCENTERS OF AMERICA LLC  
 Form 4  
 August 26, 2013

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 Washington, D.C. 20549**

OMB APPROVAL

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

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

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 Richards Barry A.

2. Issuer Name and Ticker or Trading Symbol  
 TRAVELCENTERS OF AMERICA LLC [NYSE (TA)]

5. Relationship of Reporting Person(s) to Issuer  
 (Check all applicable)

(Last) (First) (Middle)  
 C/O REIT MANAGEMENT & RESEARCH LLC, TWO NEWTON PLACE 255 WASHINGTON STREET

3. Date of Earliest Transaction (Month/Day/Year)  
 08/23/2013

\_\_\_\_ Director  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
 Executive Vice President

(Street)  
 NEWTON, MA 02458

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

(City) (State) (Zip)

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount or Price		
Common Shares	08/23/2013		S		800	D	\$ 7.59 177,500
Common Shares	08/23/2013		S		100	D	\$ 7.5009 177,400
Common Shares	08/23/2013		S		200	D	\$ 7.63 177,200
Common Shares	08/23/2013		S		610	D	\$ 7.6901 176,590

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Common Shares	08/23/2013	S	12,100	D	\$ 7.55	164,490	D
Common Shares	08/23/2013	S	21,195	D	\$ 7.5	143,295	D
Common Shares	08/23/2013	S	301	D	\$ 7.64	142,994	D
Common Shares	08/23/2013	S	4,801	D	\$ 7.58	138,193	D
Common Shares	08/23/2013	S	200	D	\$ 7.65	137,993	D
Common Shares	08/23/2013	S	200	D	\$ 7.54	137,793	D
Common Shares	08/23/2013	S	3	D	\$ 7.61	137,790	D
Common Shares	08/23/2013	S	100	D	\$ 7.6925	137,690	D
Common Shares	08/23/2013	S	3,900	D	\$ 7.67	133,790	D
Common Shares	08/23/2013	S	200	D	\$ 7.69	133,590	D
Common Shares	08/23/2013	S	90	D	\$ 7.71	133,500	D
Common Shares	08/23/2013	S	3,900	D	\$ 7.6	129,600	D
Common Shares	08/23/2013	S	1,300	D	\$ 7.62	128,300	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.**

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(9-02)

**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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
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4, and 5)

Code	V	(A)	(D)	Date	Expiration	Title	Amount or Number of Shares
				Exercisable	Date		

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Richards Barry A. C/O REIT MANAGEMENT & RESEARCH LLC TWO NEWTON PLACE 255 WASHINGTON STREET NEWTON, MA 02458			Executive Vice President	

## Signatures

/s/ Barry A. Richards                      08/26/2013

\_\_\_\_\_  
\*\*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).

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.