Edgar Filing: TRAVELCENTERS OF AMERICA LLC - Form 3

TRAVELCENTERS OF AMERICA LLC Form 3 January 26, 2007 FORM 3 UNITED STATES SECUR Was

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

INITIAL STATEMENT OF 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

OMB APPROVAL

OMB Number: 3235-0104 Expires: January 31, 2005 Estimated average burden hours per response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> GILMORE BARBARA D			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol TRAVELCENTERS OF AMERICA LLC [AMEX: TA]				
(Last)	(First)	(Middle)	01/26/2007	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
C/O HOSPITALITY PROPERTIES TRUST, 400 CENTRE STREET (Street)				(Check all applicable) X_Director10% Owner OfficerOther (give title below) (specify below)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person	
NEWTON, MA 02458							Form filed by More than One Reporting Person	
(City)	(State)	(Zip)	Table I - N	Non-Derivat	tive Securiti	ies Be	neficially Owned	
1.Title of Secur (Instr. 4)	ity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	*	
Common Sh	ares		0 (1)		D	Â		
Reminder: Repo			ach class of securities benefic	ially S	EC 1473 (7-02	2)		
	Perso infor requi	ons who res mation cont ired to respo	pond to the collection of ained in this form are not ond unless the form disp MB control number.	t				

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

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

Edgar Filing: TRAVELCENTERS OF AMERICA LLC - Form 3

Date	Expiration	Title		Security	Direct (D)	
Exercisable	Date		Number of		or Indirect	
			Shares		(I)	
					(Instr. 5)	

Reporting Owners

Reporting Owner Name / Address		Relationships				
		Director	10% Owner	Officer	Other	
GILMORE BARBARA D C/O HOSPITALITY PROPERTIES TRUST 400 CENTRE STREET NEWTON, MA 02458		ÂX	Â	Â	Â	
Signatures						
/s/ Barbara D. Gilmore	01/26/2007					
<u>**</u> Signature of Reporting Person	Date					

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).

TA is currently a wholly owned subsidiary of HPT TA Properties Trust (HPT TA Properties), which is a wholly owned subsidiary of Hospitality Properties Trust (HPT). HPT TA Properties will own all of the equity interests in TA at the time this Form 3 is filed with the Securities and Exchange Commission. None of the officers or directors of TA own any shares of TA at that time. Following the closing of

(1) Securities and Exchange commission role of the order of all ecloses of TA own any states of TA at that third, Following the closing of the acquisition of TravelCenters of America, Inc. by HPT, HPT TA Properties plans to distribute all of its equity interest in TA to HPT. HPT has announced that it intends to spin off all of its shares of TA. If the spinoff takes place, the reporting person intends to file a Form 4 or 5, if and as applicable, reflecting her ownership, if any, of shares of TA.

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.