Edgar Filing: GAP COINVESTMENT PARTNERS II L P - Form 4

GAP COINVESTMENT PARTNERS II L P

Form 4 January 29, 2009

FORM 4

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

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 * **GAP COINVESTMENT** PARTNERS II L P

> (First) (Last)

GREENWICH, CT 06830

(City)

Security

(Instr. 3)

Common

Stock

C/O GENERAL ATLANTIC SERVICE COMPANY LLC. 3 PICKWICK PLAZA

(Street)

(State)

12/31/2008

2. Issuer Name and Ticker or Trading Symbol

PM Liquidating Corp. [PILLQ]

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

4. If Amendment, Date Original

Filed(Month/Day/Year)

12/31/2008

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner __X__ Other (specify Officer (give title

below) below) See Remarks

6. Individual or Joint/Group Filing(Check

Applicable Line)

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

Person

(Zip)

(Middle)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of 2. Transaction Date 2A. Deemed 3.

> (Month/Day/Year) Execution Date, if (Month/Day/Year)

Code (Instr. 8)

S

Transaction(A) or Disposed of (D) (Instr. 3, 4 and 5)

4. Securities Acquired

(A)

or

D

5. Amount of Securities Beneficially Owned Following

(D) or Indirect (I) (Instr. 4)

6. Ownership 7. Nature of Form: Direct Indirect Beneficial Ownership (Instr. 4)

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

Reported Transaction(s) (Instr. 3 and 4)

Price Code V (D) Amount

236,441

0 (1)

D

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

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SEC 1474 (9-02)

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

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate Amou		nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative				Securit	ties	(Instr. 5)	Bene
	Derivative				Securities Acquired			(Instr.	3 and 4)		Owne
	Security							`			Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						· ·
					4, and 5)						
					, ,						
									Amount		
						Date Exercisable	Expiration Date		or		
								Title	Number		
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

GAP COINVESTMENT PARTNERS II L P C/O GENERAL ATLANTIC SERVICE COMPANY LLC 3 PICKWICK PLAZA GREENWICH, CT 06830

See Remarks

Signatures

/s/ Matthew Nimetz, General

Partner 01/29/2009

**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).

The Reporting Person and certain affiliates of the Reporting Person (collectively, the "Sellers") sold a total of 3,381,802 shares of common stock of the Issuer to Jefferies & Co., Inc. for an aggregate purchase price equal to \$1.00 to be divided pro rata among the Sellers in proportion to each Seller's shares.

Remarks:

Effective December 31, 2008, the Reporting Person sold all of its shares of common stock of the Issuer and no longer has a relationship to the Issuer.

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.

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