

SEP 29 2008

Washington, DC 103

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

TEMPORARY FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: September 30, 2008 Estimated average burden hours per response 16.00

SEC USE ONLY Prefix Serial DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

Private Placement of Limited Partnership Interests in Trivest Fund IV, L.P. and Trivest Fund IV-A, L.P., Parallel Funds

Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment

PROCESSED

OCT 06 2008

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer (check if this is an amendment and name has changed, and indicate change.)

THOMSON REUTERS

Trivest Fund IV, L.P. and Trivest Fund IV-A, L.P., Parallel Funds

Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 550 South Dixie Highway, Suite 300, Coral Gables, FL 33146 305-858-2200 Address of Principal Business Operations (if different from Executive Offices) (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Same as Executive Offices Same as Executive Offices

Brief Description of Business



Type of Business Organization

- corporation limited partnership, already formed Other (please specify) business trust limited partnership, to be formed

Actual or Estimated Date of Incorporation or Organization: Month Year Actual Estimated

Jurisdiction of Incorporation or Organization (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009.

Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. Information Required: A new filing must contain all information requested. Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (5-05) 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.

**A. BASIC IDENTIFICATION DATA**

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General Partner

Full Name (Last name first, if individual)

**Trivest Partners GP, LLC**

Business or Residence Address (Number and Street, City, State, Zip Code)

**550 South Dixie Highway, Suite 300, Coral Gables, FL 33146**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer <sup>(1)</sup>  Director <sup>(1)</sup>  General and/or Managing Partner

Full Name (Last name first, if individual)

**Templeton, Troy D.**

Business or Residence Address (Number and Street, City, State, Zip Code)

**550 South Dixie Highway, Suite 300, Coral Gables, FL 33146**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer <sup>(1)</sup>  Director <sup>(1)</sup>  General and/or Managing Partner

Full Name (Last name first, if individual)

**Elias, Jon E.**

Business or Residence Address (Number and Street, City, State, Zip Code)

**550 South Dixie Highway, Suite 300, Coral Gables, FL 33146**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer <sup>(1)</sup>  Director <sup>(1)</sup>  General and/or Managing Partner

Full Name (Last name first, if individual)

**Vandenberg, Jr., Peter**

Business or Residence Address (Number and Street, City, State, Zip Code)

**550 South Dixie Highway, Suite 300, Coral Gables, FL 33146**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director <sup>(1)</sup>  General and/or Managing Partner

Full Name (Last name first, if individual)

**Powell, Earl W.**

Business or Residence Address (Number and Street, City, State, Zip Code)

**550 South Dixie Highway, Suite 300, Coral Gables, FL 33146**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer <sup>(1)</sup>  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Gershman, David**

Business or Residence Address (Number and Street, City, State, Zip Code)

**550 South Dixie Highway, Suite 300, Coral Gables, FL 33146**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer <sup>(1)</sup>  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Moran, Richard H.**

Business or Residence Address (Number and Street, City, State, Zip Code)

**550 South Dixie Highway, Suite 300, Coral Gables, FL 33146**

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

(1) of Trivest Partners IV, Inc., the managing member of Trivest Partners GP, LLC, the General Partner of the Issuer.



**C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS**

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." .....

\$ 324,170,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.

	Payments to Officers, Directors & Affiliates	Payments to Others
Salaries and Fees (Management Fee).....	<input checked="" type="checkbox"/> \$ 6,000,000	<input type="checkbox"/> \$ _____
Purchase of real estate .....	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____
Purchase, rental or leasing and installation of machinery and equipment .....	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____
Construction or lease of plant buildings and facilities.....	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) .....	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____
Repayment of indebtedness.....	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____
Working capital .....	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____
Other (specify) <u>Investments in Securities of Certain Businesses</u> .....	<input type="checkbox"/> \$ _____	<input checked="" type="checkbox"/> \$ 318,170,000
.....		
.....		
Column Totals .....	<input checked="" type="checkbox"/> \$ 6,000,000	<input checked="" type="checkbox"/> \$ 318,170,000
Total Payments Listed (column totals added).....	<input checked="" type="checkbox"/> \$ 324,170,000	

**D. FEDERAL SIGNATURE**

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) <b>Trivest Fund IV, L.P. and Trivest Fund IV-A, L.P., Parallel Funds</b>	Signature 	Date <b>9-23-08</b>
Name of Signer (Print or Type) <b>David Gershman</b>	Title of Signer (Print or Type) <b>Principal, General Counsel and Secretary of Trivest Partners IV, Inc., the Managing Member of Trivest Partners GP, LLC, the General Partner of the Issuer</b>	

**END**

**ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)