## Edgar Filing: BARTEL HOLGER - Form 4

BARTEL HC Form 4	-								
November 18	3, 2008								
FORM	4				~		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		PPROVAL
	UNITEDS		JRITIES A ashington,			NGE (	COMMISSION	OMB Number:	3235-0287
Check this if no long								Expires:	January 31
subject to Section 16 Form 4 or	<b>51A1EM</b> 5.	ENT OF CHA	NGES IN I SECUR			LOW	NERSHIP OF	Estimated a burden hou response	irs per
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section 17(a)		Utility Hold	ling Com	ipany	Act o	ge Act of 1934, f 1935 or Sectic 40		
(Print or Type R	esponses)								
1. Name and Ad BARTEL HO	ddress of Reporting P OLGER	erson <u>*</u> 2. Iss Symbo	uer Name <b>and</b> l	Ticker or '	Tradin	g	5. Relationship o Issuer	f Reporting Per	son(s) to
		TRAV	/ELZOO IN	-	0]		(Chee	ck all applicable	e)
(Last)	(First) (M		of Earliest Tra	ansaction				100	
800 WEST E REAL, SUIT	EL CAMINO TE 180	(Month 11/14	/Day/Year) /2008				_X_ Director _X_ Officer (giv below) Chief		
	(Street)	4. If A	nendment, Da	te Original			6. Individual or J	oint/Group Fili	ng(Check
MOUNTAIN	N VIEW, CA 9404		Ionth/Day/Year)	)			Applicable Line) _X_ Form filed by Form filed by I	One Reporting Pe More than One Re	
MOUNTAI	$\mathbf{V} = \mathbf{W}, \mathbf{C} \mathbf{A} \rightarrow \mathbf{W}$	+0					Person		
(City)	(State) (Z	Zip) Ta	ble I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea	Code	4. Securi onAcquirec Disposec (Instr. 3,	l (A) c l of (D 4 and (A)	)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock	11/14/2008		Р	63 <u>(1)</u>	A	\$ 4.5	84,613	I	Azzurro Capital Inc. <sup>(2)</sup>

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)

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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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	7. Title Amoun Underl Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address			Relationships	
	Director	10% Owner	Officer	Other
BARTEL HOLGER 800 WEST EL CAMINO REAL SUITE 180 MOUNTAIN VIEW, CA 94040	Х		Chief Executive Officer	
Signatures				

/s/ Holger Bartel 11/18/2008
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<u>\*\*</u>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).

Represents a purchase of 6,339 shares of Travelzoo Inc. common stock by Azzurro Capital Inc. The Reporting Person, the brother of
(1) Ralph Bartel, indirectly holds 1% of Azzurro Capital Inc. through HBT Corporation LLC and Ralph Bartel, through a trust, indirectly holds the remaining 99% of Azzurro Capital Inc.

(2) The Reporting Person disclaims beneficial ownership of securities in excess of his 1% holdings in Azzurro Capital Inc.

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.