SILVESTRI JOSEPH

Form 4

August 27, 2010

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

Number: 3235-0287

OMB APPROVAL

Expires: January 31, 2005
Estimated average

burden hours per response... 0.5

if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

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

may continue.

See Instruction

30(h) of the Investment Company Act of 1940

1(b).

Common

Common

Stock

Stock

08/25/2010

(Print or Type Responses)

1. Name and Address of Reporting Person SILVESTRI JOSEPH			2. Issuer Name and Ticker or Trading Symbol				>	5. Relationship of Reporting Person(s) to Issuer			
			TRIUM	IPH GRO	UP INC	[TGI]		(Check	all applicable)	
(Last)	(First) (1	Middle)	3. Date o	f Earliest Tr	ansaction						
			(Month/I	Day/Year)				_X_ Director		Owner	
1550 LIBERTY RIDGE, SUITE 100			08/25/2010					Officer (give t below)	er (specify		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Mo	nth/Day/Year)			Applicable Line) _X_ Form filed by O			
WAYNE, I	PA 19087							Form filed by Moreon	ore than One Rep	porting	
(City)	(State)	(Zip)	Tab	le I - Non-E	erivative	Securit	ies Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Date	2A. Deen	ned	3.	4. Securit	ies Acq	uired	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution	Date, if	Transactio	n(A) or Dis	sposed	of (D)	Securities	Ownership	Indirect	
(Instr. 3)		any		Code	(Instr. 3,	4 and 5)	Beneficially	Form: Direct	Beneficial	
		(Month/D	ay/Year)	(Instr. 8)				Owned	(D) or	Ownership	
								Following	Indirect (I)	(Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			

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

P

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.

SEC 1474

(9-02)

 $1,000^{(1)}$

30,900

66.548

Ι

D

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

1,000 A

By Trust

Edgar Filing: SILVESTRI JOSEPH - Form 4

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title a	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amount	of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	Year)	Underlyi	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr. 3	and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								٨	mount		
							Expiration Date	or Title Nu	umber		
								of			
				Code V	(A) (D)				hares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
•	Director	10% Owner	Officer	Other		
SILVESTRI JOSEPH 1550 LIBERTY RIDGE SUITE 100 WAYNE, PA 19087	X					

Signatures

John B. Wright, II, Power of Attorney for Joseph Silvestri

08/27/2010

**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).

Open market acquisition by the Silvestri 2002 Trust of which the reporting person's spouse serves as trustee. The reporting person

disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.

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.

Reporting Owners 2