FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to

BlueMountain Long Short Grasmoor Fund Ltd.

(Middle)

(First)

(Last)

280 PARK AVENUE

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden per response: 0.5

> > 7. Nature of Indirect Beneficial Ownership (Instr. 4)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

obligati	ions may contir tion 1(b).			File					) of the Secur Investment C						hour	s per	response:	0
		Reporting Person* <u>GP Holdings,</u>	LLC		2. Iss	uer N	lame a	and Tic	ker or Trading	Symbol					plicable)	-	erson(s) to Is	
(Last) (First) (Middle) 280 PARK AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 11/12/2012								er (give title w)	ve title Other below		(specify )		
5TH FL0	OOR EAST				4. If A			, Date	of Original File	ed (Month/D	ay/Year)	)	6. Indi	ividual o	or Joint/Grou	up Fil	ing (Check A	pplicable
(Street) NEW YO	ORK N	Y	10017		00/2	.0/20	13						X	Eorr	n filed by M		eporting Pers nan One Rep	
(City)	(S	tate)	(Zip)															
1. Title of	Security (Ins		[	2. Transa Date		2 <i>f</i> Ex	A. Deer cecution		3. Transactio	4. Securi	ities Acq	Benefic Juired (A) (Instr. 3, 4	or	5. Am Secur Benef Owne	ount of ities icially d Following	Fo (D)	Ownership rm: Direct or Indirect (Instr. 4)	7. Nature of Indire Benefici Ownersl
									Code V	Amount	(A (D	) or ) Pr	ice		ted action(s) 3 and 4)			(Instr. 4)
		Ta	able II - De						ired, Disp					wned				,
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	saction 3A. Deemed Execution Date,		4. Transaction Code (Instr.		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. F Der Sec (Ins	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Natu of Indire Benefici Ownersi (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares						
		f Reporting Person*  GP Holdings,	LLC				•		,			•			•			,
	RK AVENU OOR EAST		(Middle	)		-												
(Street) NEW YO	ORK	NY	10017			-												
(City)		(State)	(Zip)															
BlueM Reflect	ountain L	f Reporting Person <sup>*</sup> Long/Short Cr , a sub fund o Lund PLC		stres	<u>sed</u>													
	RK AVENU OOR EAST		(Middle	)														
(Street) NEW Y	ORK	NY	10017															
(City)		(State)	(Zip)															
1. Name a	nd Address of	Reporting Person*																

5TH FLOOR EAST						
(Street) NEW YORK	NY	10017				
(City)	(State)	(Zip)				

## **Explanation of Responses:**

## Remarks:

This Form 4 amends the Form 4 filed on June 26, 2013 by BlueMountain GP Holdings, LLC and the other signatories thereto (the "June 26 Filing") by ticking the box indicating that effective with the transactions reported on the June 26 Filing, such signatories are no longer subject to Section 16.

BlueMountain GP Holdings,

LLC By: /s/ Paul Friedman, 03/19/2014

**Chief Compliance Officer** 

BlueMountain Long/Short

Credit and Distressed

Reflection Fund, a sub fund of

AAI BlueMountain Fund PLC

By: BlueMountain Capital

Management, LLC By: /s/ Paul

Friedman, Chief Compliance

**Officer** 

BlueMountain Long Short

Grasmoor Fund Ltd. By:

BlueMountain Capital

03/19/2014 Management, LLC By: /s/ Paul

Friedman, Chief Compliance

**Officer** 

\*\* Signature of Reporting Person

Date

03/19/2014

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).