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).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL									
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1. Name and Address of Reporting Person* FRIEDMAN FLEISCHER & LOWE GP					2. Is: <u>TE</u>	2. Issuer Name and Ticker or Trading Symbol TEMPUR PEDIC INTERNATIONAL INC [TENV]										licable)	•		ssuer Dwner	
LLC (Last) (First) (Middle)															Officer (give title X Other (specify below) General partner					
C/O FRIEDMAN FLEISCHER & LOWE ONE MARITIME PLAZA, 10TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 12/06/2004														
(Street) SAN CA 94111 FRANCISCO				* 4. lf /	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
(City)	(St	-																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Exec if an	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
l									Code	v	Amount	(A) or (D) Prid		e	Transaction(s) (Instr. 3 and 4)				, ,	
Common Stock 12/0				12/06/2	2004				S		477,026	D	D \$18		16,529,385		385 I		See Footnote ⁽¹⁾	
Common Stock 12/06/20					004		S		8,629	D \$18		8.96	299,018		I		See Footnote ⁽²⁾			
		Та	able II -								osed of, o convertib				wned					
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution D urity or Exercise (Month/Day/Year) if any		on Date,	Code (In				6. Date Exerc Expiration D (Month/Day/		te	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)				9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date		Amoun or Numbe of Shares							
1. Name and Address of Reporting Person* FRIEDMAN FLEISCHER & LOWE GP LLC																				
(Last)		(First)	(Mi	ddle)																
C/O FRIEDMAN FLEISCHER & LOWE ONE MARITIME PLAZA, 10TH FLOOR																				
(Street) SAN FRANCISCO CA 94111																				
(City)		(State)	(Zip))																
1. Name and Address of Reporting Person* <u>FFL EXECUTIVE PARTNERS LP</u>																				
(Last) (First) (Middle) C/O FRIEDMAN FLEISCHER & LOWE ONE MARITIME PLAZA, 10TH FLOOR																				
(Street) SAN FANCISCO CA 94111					-															
(City)		(State)	(Zip)																

Explanation of Responses:

1. By Friedman Fleischer & Lowe Capital Partners, LP. The reporting person is the general partner of the limited partnership which owns the reported shares and disclaims beneficial ownership of any shares in which it does not have a pecuniary interest.

2. By FFL Executive Partners, LP. The reporting person is the general partner of the limited partnership which owns the reported shares and disclaims beneficial ownership of any shares in which it does not have a pecuniary interest.

/s/ Christopher A. Masto 12/06/2004

** Signature of Reporting Person Date

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

* 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).

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.