FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OWR APP	ROVAL
OMB Number:	3235-02

Check this box if no longer subject to					
Section 16. Form 4 or Form 5					
obligations may continue. See					
Instruction 1(b).					

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

287 Estimated average burden 0.5 hours per response:

1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
MONTGOMERY DAVID				TEMPUR PEDIC INTERNATIONAL INC						<u> </u>	Director			10% Owner				
(Control of the control of the contr				$-\lfloor^1$	TPX ]							:	Officer (below)	(give title	Other (spe below)		pecify	
, ,	(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)							Exec VP, Pres. Intl. Ops.					
C/O TEMPUR-PEDIC INTERNATIONAL INC.				0	06/28/2006													
1713 JAGGIE FOX WAY				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable							
				—   <sup>4</sup>	. If Ame	endment, I	Date o	f Original F	led (M	1onth/Da	y/Year)	6. Ir		oint/Group	Filing	(Check Appl	licable	
(Street)													Y Form fil	ed by One	Repo	rting Person		
LEXING	TON K	ΥY	40511										Form fil	ed by More	e than	One Report	ing	
													Person					
(City)	(5	State)	(Zip)															
		Та	ble I - Non-D	erivati	ve Se	ecuritie	s Ac	quired, [	Dispo	osed o	f, or Be	neficiall	/ Owned					
1. Title of 9	Security (Ins	tr. 3)	2. 1	ransacti	on	2A. Deem	ed	3.	1	4. Securi	ties Acquir	ed (A) or	5. Amoun	t of	6. Ow	nership 7	. Nature of	
Date (Month/			e			execution Date,		r, Transaction Disposed Code (Instr.		ed Of (D) (Instr. 3, 4 and		5) Securities Beneficially		Form: Direct   I		ndirect Beneficial		
			munbayı	i cai,	(Month/Day/Yea							Owned Fo	Following (I) (Ir d tion(s)		nstr. 4) C	Ownership (Instr. 4)		
							Code	V Amount		(A) o	r Price	Reported Transacti						
									Amount	(D)	11100	(Instr. 3 a	and 4)					
			Table II - Dei					,	•	,		,	Owned					
			(e.g	J., puts	s, cal	ls, warr	ants	, options	s, cor	nvertil	ble secu	ırities)						
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. Transa Code 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		oiration te	Title	Amount or Number of Shares		(Instr. 4)	(-/			
Stock Option (right to	\$13.47	06/28/2006		A		350,000		(1)	06/2	28/2016	Common Stock	350,000	\$13.47	350,00	00	D		

## **Explanation of Responses:**

1. These options vest and become exercisable in a series of installments. The first installment, which consists of 25% of the aggregate number of options granted, will vest on February 24, 2008. An additional 6.25% of the original aggregate number of options granted will vest and become exercisable in a series of twelve successive equal quarterly installments beginning on May 24, 2008.

/s/ William H. Poche, attorney-

in-fact

\*\* Signature of Reporting Person

Date

07/03/2006

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

- $^{\star}$  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.