BEDFORD SCOTT Form 3 May 29, 2009 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005 **SECURITIES** Estimated average burden hours per Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response... 0.5 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> PENINSULA CAPITAL MANAGEMENT, LP			2. Date of Event Requiring Statement (Month/Day/Year) 05/19/2009	3. Issuer Name and Ticker or Trading Symbol ELOYALTY CORP [ELOY]				
(Last)	(First)	(Middle)		4. Relationshi Person(s) to Is	onship of Reporting) to Issuer		5. If Amendment, Date Origina Filed(Month/Day/Year)	
235 PINE ST	TREET,Â	SUITE		(Check	all applicable			
1600				(Check all applicable)				
SAN FRANCISCO	(Street)	04104		Director Officer (give title below	X10% Othe v) (specify bel	r	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person X_ Form filed by More than One	
FRANCISCO	J,A CAA	94104					Reporting Person	
(City)	(State)	(Zip)	Table I - N	Non-Derivati	ive Securit	ies Bei	neficially Owned	
1.Title of Securi (Instr. 4)	ity		2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	*	
Common Sto	ock		1,468,278		Ι	Foot	note (1)	
Reminder: Repo owned directly o			ach class of securities benefici	ially SI	EC 1473 (7-02	2)		
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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships				
Reporting O when Annue / Madress	Director	10% Owner	Officer	Other	
PENINSULA CAPITAL MANAGEMENT, LP 235 PINE STREET SUITE 1600 SAN FRANCISCO, CA 94104	Â	ÂX	Â	Â	
BEDFORD SCOTT 235 PINE STREET SUITE 1600 SAN FRANCISCO, CA 94104	Â	X	Â	Â	
Signatures					
Peninsula Capital Management, L.P.(+), By: /s/ S Bedford	cott	05/29/2009			
**Signature of Reporting Person			Date		
/s/ Scott Bedford(+)		05/29/2009			
**Signature of Reporting Person			Date		

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).

These securities are held in the accounts of investment funds over which Peninsula Capital Management, LP and Scott Bedford have

(1) investment discretion (the "Reporting Persons"). Peninsula Capital Management, LP is the general partner and/or the investment manager of such investment funds and Scott Bedford is the President of Peninsula Capital Management, Inc. which is Peninsula Capital Management, LP's general partner.

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Remarks:

(+) Each such Reporting Person disclaims beneficial ownership of the reported securities except to pecuniary interest therein, and this report shall not be deemed an admission that such Reporting Per owner of the securities for purposes of Section 16 of the Securities Exchange Act of 1934, as an 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.