## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasiiiigion,	D.C. 20349

OMB APPROVAL								
OMB Number:	3235-028							
Estimated average h	nurden							

hours per response: 0.5

## 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

					01 \	5000	.1011 30(11	, or tire	iiivestiiie	00	прапу лег	01 10	0-10								
Name and Address of Reporting Person*				2. Issuer Name <b>and</b> Ticker or Trading Symbol  CMGI INC [ CMGI ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
GRAY	<u>PETER I</u>	<u> </u>			1		1111	L CI								Direc	tor		10% C	wner	
,				-												er (give title			(specify		
(Last)	(Fi	rst) (	Middle)		3. D	ate	of Earlie	st Trans	saction (1	√onth	/Day/Year)				below) below)						
C/O CMGI, INC.					06/	06/18/2008									EVP and General Counsel						
1100 WINTER STREET, SUITE 4600			H.,																		
					.   4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														٦١	,	Eorm	n filed by One	a Danorti	na Darc	on	
WALTH	AM M	Α (	)2451														,	•	•		
					.										Form filed by More than One Reporting Person						
(City)	(\$1	ate) (	Zip)																		
(Oity)		(	<u></u>																		
		Tabl	e I - Non	-Deriv	ative	Se	ecuriti	es Ac	quired	, Dis	posed o	of, o	or Ben	efici	ally O	wne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Exe Day/Year) if ar		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3,			4 and Secu Bene Own		cially I Following	Form: D (D) or In	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									v	Amount		(A) or (D)	Price	,  т	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 06/				06/18	6/18/2008				F	T	529(1)	)	D	\$10	.95	95 20,658		Г			
		Та	ıble II - D	erivat	ive S	ecı	urities	Acau	ired. C	Disp	osed of.	or I	Benef	iciall	v Owi	ned					
											onvertib										
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	Date,	4. Transaction Code (Instr. 8)		n of r. Deri Sec Acq (A) Disp of (I (Ins	n of		6. Date Exercisable Expiration Date (Month/Day/Year)			nd 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Pric Deriva Securi (Instr.	vative irity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)	Date Exercis	able	Expiration Date	Titl	or Nu of	nount mber ares	er						

## **Explanation of Responses:**

1. Payment of tax liability by delivering securities incident to the vesting of shares of restricted stock on June 18, 2008 in accordance with Rule 16b-3 and a pre-existing Rule 10b5-1 Sales Plan established by the reporting person on July 13, 2007.

/s/ Thomas B. Rosedale

(Pursuant to Power of

06/19/2008

Attorney)

\*\* 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.