U. S. SECURITIES AND EXCHANGE COMMISSION

02025575

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Washington, D.C. 20549

MAR 1 8 2002

363

Prefix

Serial DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)
Accredited Investor Private Placement of Initial Notes, Warrants to purchase Common Shares, Convertible Notes, and
issuance of Common Shares upon exercise of such Warrants and upon conversion of such Notes
Filing Under (Check box(es) that apply): Rule 504 Rule 505X Rule 506X Section 4(6)X ULOE
Type of Filing: X New Filing Amendment
A BASIC IDENTIFICATION DATA
Enter the information requested about the issuer
Name of Issuer (_ check if this is an amendment and name has changed, and indicate change.)
Frontstep, Inc. (fka Symix Systems, Inc.) Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
2800 Corporate Exchange Drive, Suite 400, Columbus, Ohio 43231
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)
Brief Description of Business Develops and markets software
Type of Business Organization
Corporation limited partnership, already formed other (please specify):
Business trop limited partnership, to be formed
Month Year PROCESS
Actual or Estimated Date of Incorporation or Organization: 1 84 X Actual
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) OI H
GENERAL INSTRUCTIONS FINANCIAL
Federal:
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been, made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.
ATTENTION
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely,

failure to file the appropriate federal notice will not result in a loss of available state exemption unless such

SEC 1972 (6-88) 1 of 7

exemption is predicated on the filing of a federal notice.

•	Each promoter	of the issuer, if	the issuer has been organize	ed within	the past five years;		
• securitie	Each beneficial s of the issuer;	owner having t	he power to vote or dispose,	or direct	t the vote or disposition	of, 10% or more of a c	class of equity
•	Each executive	officer and dire	ctor of corporate issuers and	d of corpo	orate general and man	aging partners of partne	ership issuers; and
•	Each general ar	nd managing pa	artner of partnership issuers.				
Check Bo	x(es) that Apply:	Promoter	X Beneficial Owner	X	Executive Officer	_X_ Director	General and/or Managing Partner
	e (Last name first, if inverence J.	dividual)					
	r Residence Address (No lentangy River Road						
Check Bo	x(es) that Apply:	Promoter	Beneficial Owner	X_	_ Executive Officer	X Director	General and/or Managing Partner
	e (Last name first, if ind Stephen A.	dividual)					
	or Residence Address mont Road, Colum		treet, City, State, Zip Code) 20		e search	· · · · · · · · · · · · · · · · · · ·	
Check Bo	x(es) that Apply:	_ Promoter	Beneficial Owner	X	_ Executive Officer	Director	General and/or Managing Partner
	(Last name first, if inc Lawrence W.	dividual)					
	or Residence Address ce Trail Drive, Weste		treet, City, State, Zip Code)				
Check Bo	x(es) that Apply:	_ Promoter	Beneficial Owner	_X_	Executive Officer	Director _	General and/or Managing Partner
Full Name Lopez, J	e (Last name first, if incorge L.	dividual)					· · · · · · · · · · · · · · · · · · ·
	or Residence Address uthway Drive, Uppel		reet, City, State, Zip Code) 5 43221	-	<u>. </u>		
Check Bo	x(es) that Apply:	_ Promoter	Beneficial Owner	X_	_ Executive Officer	Director	General and/or Managing Partner
	(Last name first, if ind Daryll L.	dividual)					
	or Residence Address e Tree Court, West		reet, City, State, Zip Code) 082		·-		
Check Box	x(es) that Apply:	_ Promoter	Beneficial Owner	X	_ Executive Officer	Director	General and/or Managing Partner
Full Name Buettin, I	(Last name first, if inc	dividual)					
	Residence Address (Nu okery Way, Wester		ty, State, Zip Code)	***		·	<u> </u>
Check Box	x(es) that Apply:	Promoter	Beneficial Owner	X	_ Executive Officer	Director	General and/or Managing Partner
	(Last name first, if inc , Robert D.	dividual)					······
	or Residence Address marisk Court, Dubli		reet, City, State, Zip Code)		AND THE PARTY OF T		
SEC 1972	(6-88) 2 of 17	(L	Jse blank sheet, or copy and use	additional	copies of this sheet, as ne	ecessary)	

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. X Executive Officer Check Box(es) that Apply: ___ Beneficial Owner Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Yount, Stephen A. Business or Residence Address (Number and Street, City, State, Zip Code) 5221 E. Buena Vista Drive, Paradise Valley, Arizona 85253 Check Box(es) that Apply: ____ Promoter Beneficial Owner X Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Haslup, Aggie L. Business or Residence Address (Number and Street, City, State, Zip Code) 962 Cherryfield Avenue, Columbus, Ohio 43235 _____ Beneficial Owner ____ Executive Officer Check Box(es) that Apply: ____ Promoter X Director General and/or Managing Partner Full Name (Last name first, if individual) Rutherford, James A. Business or Residence Address (Number and Street, City, State, Zip Code) 1 New Albany Farms Road, New Albany, OH 43054 _ Beneficial Owner Check Box(es) that Apply: _____ Promoter Executive Officer X Director General and/or Managing Partner Full Name (Last name first, if individual) Sofia, A. Zuheir Business or Residence Address (Number and Street, City, State, Zip Code) 225 Stanbery Avenue, Columbus, Ohio 43209 Check Box(es) that Apply: ____ Promoter Beneficial Owner ___ Executive Officer _X_ Director General and/or Managing Partner Full Name (Last name first, if individual) Thomas, Duke W. Business or Residence Address (Number and Street, City, State, Zip Code) 2090 Sheringham Road, Columbus, OH 43220 ____ Executive Officer General and/or Check Box(es) that Apply: _____ Promoter _____ Beneficial Owner X_ Director Managing Partner Full Name (Last name first, if individual) Goldsmith, Barry D. Business or Residence Address (Number and Street, City, State, Zip Code) 16 Avenue of Two Rivers S, Rumson, NJ 07760 Check Box(es) that Apply: ____ Promoter __ Beneficial Owner ____ Executive Officer X Director General and/or Managing Partner Full Name (Last name first, if individual) de Chazal, Guy L. Business or Residence Address (Number and Street, City, State, Zip Code) 68 Wheatley Road, Brookville, NY 11545 (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA

Each promoter of the issuer, if the issuer has been organized within the past five years;

2. Enter the information requested for the following:

SEC 1972 (6-88) 3 of 7

Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ____ Promoter Beneficial Owner ____ Executive Officer X_ Director General and/or Managing Partner Full Name (Last name first, if individual) Blackwell, Roger D, Business or Residence Address (Number and Street, City, State, Zip Code) 1738 Fishinger Road, Columbus, OH 43221 Check Box(es) that Apply: ____ Promoter __X__ Beneficial Owner ____ Executive Officer ____ Director General and/or Managing Partner Full Name (Last name first, if individual) Morgan Stanley Dean Witter & Co. Business or Residence Address (Number and Street, City, State, Zip Code) 1585 Broadway, New York, New York, 10036 X Beneficial Owner Check Box(es) that Apply: ____ Promoter Executive Officer __ Director General and/or Managing Partner Full Name (Last name first, if individual) Fallen Angel Equity Fund, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 960 Holmdel Road, Holmdel, New Jersey 07733 Check Box(es) that Apply: ____ Promoter _ Executive Officer _ General and/or _ Beneficial Owner _ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ___ __ Promoter _ Beneficial Owner ___ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ____ Promoter ___ Executive Officer __ Director Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ____ Promoter __ Executive Officer Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA

Each promoter of the issuer, if the issuer has been organized within the past five years;

2. Enter the information requested for the following:

SEC 1972 (6-88) 4 of 7

1.	Has the issu	er sold, or do	oes the issue	r intend to se	ell, to non-ac	credited inve	stors in this	offering?	•••••••		••••••		<u>_X</u> _
				Ans	wer also in A	ppendix, Col	lumn 2, if filir	ng under ULC	DE.				
2.	What is the	minimum inv	estment that	will be accep	oted from any	y individual?		.,,				\$	N/A
												Yes	No
3.	Does the offe	ering permit	joint ownersh	nip of a single	unit?	***************************************	·-···					<u>_X</u>	_
a broker o	ion for solicita or dealer regist d persons of su	tion of purch ered with the uch a broker	asers in conr s SEC and/or	nection with s with a state u may set for	sales of secu or states, lis th the inform	rities in the o t the name o nation for that	offering. If a f the broker broker or de	person to be or dealer. If ealer only.	listed is an a more than fiv	e (5) person	s to be listed	nt of	
Full Name (La	ast name first, if i	individual)										_	
Business or F	Residence Addre	ss (Number ar	nd Street, City,	State, Zip Cod	e)			· · · · · · · · · · · · · · · · · · ·					
Name of Asso	ociated Broker or	Dealer											
	ch Person Listed k "All States" (All	States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Fuli Name (La	est name first, if i	ndividual)			4.4		. ———						
Business or R	Residence Addre	ss (Number ar	d Street, City,	State, Zip Cod	e)								
Name of Asso	ciated Broker or	Dealer											
	ch Person Listed												
(Chec	k "All States" o	r check indi	Vidual States	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	All [ID]	States
[IL] [MT] [RI]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [MD] [AW]	[MI] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]	
Full Name (La	st name first, if i	ndividual)			· · · · · · · · · · · · · · · · · · ·								
Business or R	esidence Addres	ss (Number an	d Street, City,	State, Zip Code	e)					<u> </u>			·
Name of Asso	ciated Broker or	Dealer			<u></u>	<u></u>							
	ch Person Listed								"				State =
(Chec [AL] [IL] [MT] [RI]	k "All States" o [AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	(AR) [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	ા કાઉડ

Yes

No

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt: Initial Notes	\$ <u>1,500,000</u>	\$ <u>1,500,000</u>
Equity	\$ <u>6,000*</u>	\$0
X Common Preferred		
Convertible Securities (including warrants): Warrants to purchase 600,000 Common Shares	\$0	\$0
Partnership Interests	\$	\$
Other (Specify: Convertible Notes)	\$ 3,500,000	\$_3,500,000**
Total	\$ <u>5,006,000*</u>	\$_5,000,000**
Answer also in Appendix, Column 3, if filing under ULOE.		
 Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indi-cate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." 	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	6	\$ <u>5,000,000**</u>
Non-accredited Investors	0	\$0_
Total (for filings under Rule 504 only)	N/A	\$N/A
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505	N/A	\$N/A
Regulation A	N/A	\$ <u>N/A</u>
Rule 504	N/A	\$ <u>N/A</u>
Total	N/A	\$ N/A

The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees \$____ Printing and Engraving Costs..... <u>X</u>__ \$_25,000 Legal Fees..... Χ_ \$ 80,000 Accounting Fees..... \$ 20,000 Engineering Fees Sales Commissions (specify finders' fees separately)..... Other Expenses (identify) _Mailings, Shareholders Meeting \$ 20,000 \$<u>145,000</u> <u>X</u> Total.....

SEC 1972 (6-88) 6 of 7

Includes 600,000 shares subject to warrants, exercisable at \$.01 per share, and an indeterminable amount of shares to be issued upon conversion of Initial Notes and Convertible Notes.

Assuming the Issuer's shareholders approve the issuance of the Convertible Notes.

Payments to Officers, Directors, & Affiliates \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Payments to Others
Officers, Directors, & Affiliates \$ \$ \$	S
\$ \$ \$	X \$ 2,361,000
\$ \$ \$	X \$ 2,361,000
\$	X \$ 2,361,000
\$	X \$ 2,361,000
	X \$ 2,361,000
	X \$ 2,361,000
5 5	X \$ 2,361,000
5	
<u> </u>	\$
	\$
}	x \$4,861,000
<u>x</u> \$.4,	861,000
Market and American Confession of the State	Richard V. Communication of State Communicati
this notice is filed xchange Commiss aph (b)(2) of Rule 5	under Rule 505, the ion, upon written re-502.
Da Da	ate
	13 /02
•	
of Finance, CFC	and Secretary
tions (Sec. 40	11.6.0.4004)
	of Finance, CFC

SEC 1972 (6-88) 7 of 7