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 control number.

SEC 1972 (6-99)

### **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 an available state exemption unless such exemption is predicated on the filing of a federal notice.

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D 1186328

APR 1.5 2013

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

OMB APPROVAL						
OMB Number: Expires:	3235-0076 May 31, 2002					
Estimated average hours per response						

SEC USE ONLY							
Prefix	1	Serial					
DATE RECEIVED							

	g (□check if this is an a Itility and Energy Fund		e has changed, and in	ndicate change.)				
Filing Under (Ch	eck box(es) that apply):	□Rule 504	□Rule 505	⊠Rule 506		☐ Section 4(6)	<b>□</b> ₩	LOE
Type of Filing:	□New Filing	⊠Amendment						
		A.	BASIC IDENTIFI	CATION DATA	4	100) (818 110)		<u>.88                                      </u>
1. Enter the infor	mation requested about	the issuer						
Name of Issuer FrontPoint U	(□check if this is an a		e has changed, and i	ndicate change.)		— 100 100 100 000 000 000 000 000 000 00	30559	994
Address of Execu	itive Offices	·	(Number and Stree	t, City, State, Zip	Code)	Telephone Number	(Includ	ling Area Code)
Address of Princi	pal Business Operations		(Number and Stree	t, City, State, Zip	Code)	Telephone Number	(Includ	ling Area Code)
Brief Description	of Business						-	
Type of Business	Organization		<del></del>					PROCESSEE
□ corporation	<del>▼</del>	☐ limited	d partnership, already	formed	□oth	er (please specify):	1	ADD 160000
□business tru	st	☐ limited	d partnership, to be fo	ormed			İ	APR 162003
	ted Date of Incorporation	· ·	letter U.S. Postal Serv	Mont		ear □ Actu	ıal	THOMSON FINANCIAL Estimated
Julisdiction of In	corporation of Organizat	•	ada; FN for other for			·		

### GENERAL INSTRUCTIONS

# 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 in the notice constitutes a part of this notice and must be completed.

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - · Each promoter of the issuer, if the issuer has been organized within the past five years;
  - 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	☐ Director	□General and/or Managing Partner
Full Name (Last name first, if inc	lividual)			***	
FrontPoint Offshore Utility and	d Energy Fund, L.	<u>P</u>			
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
M&C Corporate Services, P.C	D. Box 309 G.T., U	Jgland House, South Chu	rch Street, George To	wn, Grand Cayma	n, Cayman Islands
Check Box(es) that Apply:	□Promoter	☐Beneficial Owner	☐Executive Officer	☐ Director	□General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Business or Residence Address	(Number and Str	eet, 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 inc	lividual)				
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)	<del></del>	<del></del>	
Check Box(es) that Apply:	Promoter	□Beneficial Owner	☐Executive Officer	☐ Director	□General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Business or Residence Address	(Number and Str	eet, 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 inc	lividual)			-	
Business or Residence Address	(Number and Str	eet, 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 inc	lividual)				
Business or Residence Address	(Number and Str	eet, 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 inc	lividual)	· · · · · · · · · · · · · · · · · · ·			
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
·	(Use blank s	heet, or copy and use addition	onal copies of this sheet,	as necessary.)	

				B. If	FORMAT	ION ABOU	T OFFERI	NG				
										-	Yes	No
1. H	Ias the issuer so	old, or does the		•				•				
					o in Appendi	•						
2. V	2. What is the minimum investment that will be accepted from any individual?								\$ Yes	No		
3. D	Does the offering permit joint ownership of a single unit?											
s: a o	Enter the information in the information of the information for the information for informatio	ration for solic erson or agent ore than five	itation of pu of a broker of (5) persons	rchasers in or dealer reg to be listed	connection vistered with are associated	vith sales of the SEC and ed persons	securities in I/or with a so of such a b	the offering tate or states roker or dea	g. If a perso , list the nan der, you ma	n to be listed ne of the bro y set forth	d is ker the	
Full Na	me (Last name	first, if individ	lual)								•	
Busines	ss or Residence	Address (1	Number and	Street, City,	State, Zip Co	ode)		<u>.</u>				· · · · · · · · · · · · · · · · · · ·
Name o	of Associated B	roker or Deale	er .									
States in	n Which Person	n Listed Has S	olicited or In	tends to Soli	cit Purchaser							
(Che	eck "All States"	or check indi	vidual States)	)							🗖	All States
[AI	.] [AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]	Γ] [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last name	first, if individ	lual)									
Busines	ss or Residence	Address (	Number and	Street, City,	State, Zip Co	ode)						
Name o	of Associated B	roker or Deale	ा									
States is	n Which Person	n Listed Has S	olicited or In	tends to Soli	cit Purchases	·s						
(Che	eck "All States"	or check indiv	vidual States)	)								All States
[AI	.] [AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[m]
$[\![\![ \bot\!]\!]$	,] [IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]		[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last name	first, if individ	lual)		-							
Busine	ss or Residence	Address (	Number and	Street, City,	State, Zip Co	ode)				-		
Name (	of Associated B	Proker or Deale	·r			····						
	Associated D		.1									
States in	n Which Person	n Listed Has S	olicited or In	tends to Soli	cit Purchaser	S				-		
(Che	eck "All States"	or check indiv	vidual States)	)							🗆	All States
[AI		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
$\Pi$	[NI]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

••	already sold. Enter "0" is 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\$	-	\$	
	Equity			
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)		_ \$_	
	Partnership Interests	257,300,000	_ \$_	257,300,000
	Other (specify)\$		_ \$ _	
	Total\$	257,300,000	_ \$.	257,300,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	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, indicate 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	26	_ \$_	257,300,000
	Non-accredited Investors		_ \$.	
	Total (for filings under Rule 504 only)		_ \$ _	
	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.			Dollar Amount
	Type of offering	Type of Security		Sold
	Rule 505		_ \$_	
	Regulation A		_ \$_	
	Rule 504	-	_ \$_	
	Total		_ \$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. 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	□	\$_	
	Legal Fees	🗵	\$ \$_	100,000
	Accounting Fees		\$_	
	Engineering Fees	□	] \$_	
	Sales Commissions (specify finders' fees separately)		] \$	
	Other Expenses (identify)			
	Total			
			-	

C. OFFERING PRI	CE, NUMBER OF INVESTORS, EXPENSI	ES AND L	SE OF PROCEEDS	
Question 1 and total expenses furnished in re	egate offering price given in response to Par sponse to Part C – Question 4.a. This differe	ence is	\$	257,200,000
used for each of the purposes shown. If t estimate and check the box to the left of the	gross proceeds to the issuer used or proposed he amount for any purpose is not known, furn estimate. The total of the payments listed must forth in response to Part C – Question 4.b above	ish an equal		
	•		Payments to Officers, Directors & Affiliates	Payments to Others
Salaries and fees		□ \$ _	□ s _	
Purchase of real estate		□ <sub>\$</sub> _	□ s _	
Purchase, rental or leasing and installati	on of machinery and equipment	□ s	🗆 s _	
·	s and facilities			
Acquisition of other businesses (inclu offering that may be used in exchang	ding the value of securities involved in this e for the assets or securities of another issuer	 s	□ <sub>\$</sub>	
-			-	
Repayment of indebtedness				
Working capital		□ <sub>\$ _</sub>		
Other (specify): Investments in equity	r-linked securities of utility and energy	_ ⊔ \$	⊠ <sub>\$ _</sub>	257,200,000
companies.		_		
		□ \$	D \$ _	
Column Totals		□ s _	× s	257,200,000
Total Payments Listed (column totals ad	ded)		⊠ <u>\$</u> 257,200,0	000
	D. FEDERAL SIGNATURE			
The issuer has duly caused this notice to be signed constitutes an undertaking by the issuer to furnish by the issuer to any non-accredited investor pursua	to the U.S. Securities and Exchange Commission			
Issuer (Print or Type)	Signature		Date	
FrontPoint Utility and Energy Fund, L.P.	Mari		April 11, 2003	
Name of Signer (Print or Type)  Arthur Lev	Title of Signer (Print or Type)  Attorney-in-Fact for FrontPoint Utility a General Partner of the Issuer	and Energ	y Fund GP, LLC,	
	ATTENTION			

SEC 1972 (6/99)

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)