### 1231465

FORM D

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

#### FORM D

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

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	SEC USI	E ONLY	
Prefix		Seria	al
	DATE RE	ECEIVED	

Name of Offering ([ ] check if this is an amendment and name has char	ged, and indicate change.)	
Class B Common Stock		
Filing Under (Check box(es) that apply): [] Rule 504	[] Rule 505 [X] Rule 506 [Section 4(6) [] U	LOE
Type of Filing: [X] New Filing [] Amendment	RECEIVED TO	
A. BASIC II	ENTIFICATION DATA	
Enter the information requested about the issuer		
Name of Issuer ([] check if this is an amendment and name has chang	d, and indicate change.)	
Pegasus Aviation, Inc.	187/3/	
Address of Executive Offices (Number and Street, City	State, Zip Code) Telephone Number (Including Area Code)	
Four Embarcadero Center, San Francisco, CA 94111		CCCEL
Address of Principal Business Operations (Number and Street, City		roam_
(if different from Executive Offices)		8 2003
P. OP.	MAY U	O Tone
Brief Description of Business	710	MSON
Ownership and leasing of aircraft and aircraft engines.		NCIAL—
Type of Business Organization	, ru•	•
• • • • • • • • • • • • • • • • • • • •	ip, already formed [] other (please specify): limited liability con	mpany
[] business trust [] limited partners		
	Month Year	
Actual or Estimated Date of Incorporation or Organization:	February] [1992] [X] Actual	•
	[ ] Estimate	ed
	er U.S. Postal Service abbreviation for State:	
CN for Canad	· FN for foreign jurisdiction) [CA]	

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

#### 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 [X] Beneficial Owner [ ] General and/or Managing Partner	[X] Executive Officer	[X] Director
Full Name (Last name first, if in			
Wiley, Richard S.	·		
	Number and Street, City, State, Zip Code)		
Four Embarcadero Center, Sa			
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner [ ] General and/or Managing Partner	[X] Executive Officer	[X] Director
Full Name (Last name first, if in Chase, Carol L.	dividual)		
Business or Residence Address (	Number and Street, City, State, Zip Code)		
Four Embarcadero Center, Sa	n Francisco, CA 94111		
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner	[ ] Executive Officer	[] Director
	[ ] General and/or Managing Partner		
Full Name (Last name first, if in	dividual)		
Business or Residence Address (	Number and Street, City, State, Zip Code)		
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner [ ] General and/or Managing Partner	[] Executive Officer	[] Director
Full Name (Last name first, if in			
D : D :	N. 1. 18: 10: 8: 17: 6: 1)		
	Number and Street, City, State, Zip Code)		
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner [ ] General and/or Managing Partner	[ ] Executive Officer	[ ] Director
Full Name (Last name first, if in	dividual)		
Business or Residence Address (	Number and Street, City, State, Zip Code)		
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner [ ] General and/or Managing Partner	[ ] Executive Officer	[ ] Director
Full Name (Last name first, if in			
D	North Circles Circles (Ch. Co. L.)		
Business or Residence Address (	Number and Street, City, State, Zip Code)		
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner [ ] General and/or Managing Partner	[ ] Executive Officer	[ ] Director
Full Name (Last name first, if in			
Business or Residence Address (	Number and Street, City, State, Zip Code)		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[ ] Executive Officer	[ ] Director
Full Name (Last name first, if in	[ ] General and/or Managing Partner dividual)		
Business or Residence Address (	Number and Street, City, State, Zip Code)		
	(Use blank sheet, or copy and use additional copie	es of this sheet, as necessary.)	

					B. IN	FORMA	TION A	BOUT O	FFERIN	G			Live or Market	
1.	Has the issue	er sold, or	does the iss			non-accree				JLOE.			Yes N [] [X	
	2. W	hat is the	minimum i	nvestment	that will b	e accepted	from any	individual	?				\$	
3.	Does the off	ering perm	it joint ow	nership of	a single u	nit?							Yes N [X] [	
4.		n for solici oker or de	tation of p aler registe	urchasers in the cred with the	in connect he SEC an	ion with sa d/or with a	ales of secu a state or s	ırities in th tates, list tl	ne offering he name of	. If a persof the broke	on to be lis r or dealer	sted is an a  If more t	or similar ssociated person than five (5) pers N/A	
Ful	Name (Last r	name first,	if individu	al)										
Bus	iness or Resid	lence Addr	ess (Numb	er and Stre	eet, City, S	State, Zip C	lode)		•••					
Nar	ne of Associat	ted Broker	or Dealer											<u> </u>
Stat	es in Which P	erson Liste	ed Has Soli	icited or In	tends to S	olicit Purcl	nasers						<u> </u>	
	(Check	"All State	s" or check	individua	ıl States)						•••••		[ ] All Stat	tes
	[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]	
Full	Name (Last r	name first,	if individu	al)										-
Bus	iness or Resid	ence Addr	ess (Numb	er and Stre	eet, City, S	state, Zip C	ode)							
Nan	ne of Associat	ed Broker	or Dealer				<del>,</del>			-				
Stat	es in Which P	erson Liste	ed Has Soli	cited or In	tends to S	olicit Purch	nasers							
	(Check	"All State:	s" or check	individua	l States)						•••••		[ ] All Sta	ites
	[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]	
Full	Name (Last n	name first,	if individu	al)							·			
Bus	iness or Resid	ence Addr	ess (Numb	er and Stre	eet, City, S	tate, Zip C	ode)							
Nan	ne of Associat	ed Broker	or Dealer											
Stat	es in Which P	erson Liste	d Has Soli	cited or In	tends to Se	olicit Purch	nasers							
	(Check	"All State:	s" or check	individua	l States)								[ ] All State	es
	[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]	
			(	Use blank	sheet, or	copy and u	se additior	al copies	of this shee	t, as neces	sary.)			

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 [X] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Ammanata	Amount Already
	Type of Security	Aggregate Offering Price	Sold
	Debt	\$	\$
	Equity	\$19,388,000*	\$19,388,000
	[X] Common [] Preferred		
	Convertible Securities (including warrants)	\$	\$
		<b>^</b>	<b>•</b>
	Partnership Interests	\$	\$
	Other (specify)	J	Φ
	Total	\$ <u>19,388,000</u> *	\$19,388,000
	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."		
	is none of zero.	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors		\$
	Non-accredited Investors		\$
	Total (for filings Under Rule 504 Only)		¢
	Total (for filings Older Rule 304 Olly)		J
	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.		
	isted in the Colonial I.		
	Type of offering	Type of	Dollar Amount
	D.J. 505	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Tally 201		<u> </u>
	Total		\$
<b>1</b> .	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.		
	o, do comingo.		
	Transfer Agent's Fees	[]	\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 10,000
	Accounting Fees	[]	\$
	Engineering Fees		\$
	Sales Commissions (Specify finder's fees separately)		\$

10,000

This figure is based on an appraisal of the value of the shares following the consummation of an anticipated debt restructuring.

		AT 13 C. C. ACCO. S ALL DO LINE AND A SECOND STATE OF THE SECOND S	Constitution in The Constitution of the	en en al la la participa de la		1945/10/EPI-2200-10	AND A REAL PROPERTY OF SAME PLANT AND
	<ul> <li>b. Enter the difference between the aggregate offering price given</li> <li>Question 1 and total expenses furnished in response to Part C difference is the "adjusted gross proceeds to the issuer."</li> </ul>	- Question 4.a.	This				<u> </u>
5.	Indicate below the amount of the adjusted gross proceeds to proposed to be used for each of the purposes shown. If the amounot known, furnish an estimate and check the box to the left of the of the payments listed must equal the adjusted gross proceeds to response to Part C – Question 4.b above.	ant for any purple estimate. The	ose is total				
					to Officers, & Affiliates	Paymer	ts To Others
	Salaries and fees	••••••	[]	\$	[]	\$	
	Purchase of real estate		[]	\$	[].	\$	
	Purchase, rental or leasing and installment of machinery and	equipment	[]	\$	[]	\$	
	Construction or leasing of plant buildings and facilities		[]	\$	[]	\$	
	Acquisition of other businesses (including the value of secur offering that may be used in exchange for the assets of issuer pursuant to a merger)	securities of an	other	\$	[ ]	\$	
	Repayment of indebtedness			\$		\$	
	Working capital		[]	\$	[]	\$	
	Other:		[]	\$	[]	\$	
•:-	Column totals	******	[]	\$	[]	\$	
	Total payments listed (column totals added)			[] \$	0		
		RAL SIGNATI	iana				
	uer has duly caused this notice to be signed by the undersigned duly at attention and the undertaking by the issuer to furnish to the U.S. Securities and E	Exchange Comn					
	er to any non-accredited investor pursuant to paragraph (b)(2) of Rule	: 502.					
he issu	er to any non-accredited investor pursuant to paragraph (b)(2) of Rule  Print or Type)		0	The la		Date	1 . 000 4
he issu ssuer (	er to any non-accredited investor pursuant to paragraph (b)(2) of Rule  Print or Type)  Pegasus Aviation, Inc.	Signature		Swiley			1, 2003
ssuer (I	er to any non-accredited investor pursuant to paragraph (b)(2) of Rule  Print or Type)	Signature Title of Sig	mer (Pri	7			1, 2003

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

	E: STATE	SIGNATURE							
1.	Is any party described in 17 CFR 230.252 presently subject to any of thrule?	ne disquaimention provisions of such	Yes No						
2.	See Appendix, Column 5, for state response.								
3.	. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.								
Issu	er (Print or Type) Pegasus Aviation, Inc.	Signature	Date						
Nan	ne of Signer (Print or Type)	Title of Signer (Print or Type)	1						

#### Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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1		2	3			,	5		
	to non-ac		Type of Security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (part C-Item 2)				lification ate ULOE , attach ation of granted) - Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ		_							
AR									
CA									
СО									
СТ									
DE									
DC									
FL									
GA									
HI		_							
ID									
IL									
IN									
IA					-				
KS									
KY									
LA									
ME									
MD									~ ~ ~
MA									
MI									
MN		_							
MS									
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MT									
NE									

			india.	774 774	APPENDIX				4	
1	T —	2	3		4				5	
	to non-a	to Sell ccredited s in State -Item 1)	Type of Security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E- Item 1)	
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited		Yes	No		
NV										
NH										
NJ					<u>-</u>					
NM										
NY										
NC										
ND										
ОН										
ОК										
OR										
PA										
RI							A			
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PR										