### 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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(	OMB APPROVAL
Expires: Estimated	nber:
SE	C USE ONLY
Prefix	Serial
D A	TE DECENIED

UNITORNIED OFFERING EACH	DATE (COCIVED						
Name of Offering ( check if this is an amendment and name has changed, and indicate of	change.)						
Oak Hill Credit Opportunities Fund, L.P.							
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506  Type of Filing: New Filing Amendment	Section 4(6) ULOE						
A. BASIC IDENTIFICATION DA	ATA CHOUESSED						
Enter the information requested about the issuer	D 007 2 0 2005						
Name of Issuer ( check if this is an amendment and name has changed, and indicate of Oak Hill Credit Opportunities Fund, L.P.							
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Common Annual Common Annu						
201 Main Street, Suite 1910, Fort Worth, Texas 76102	(817) 338-8391						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)						
Brief Description of Business	/cx						
Hedge Fund	<pre>&lt;&lt; oct 1 7 2005 &gt;</pre>						
Type of Business Organization  ☐ corporation ☐ business trust ☐ limited partnership, already formed ☐ other (pl	ease specify):						
Month Year  Actual or Estimated Date of Incorporation or Organization: □図□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□							
GENERAL INSTRUCTIONS							
Federal:							
Who Must File: All issuers making an offering of securities in reliance on an exemption under Reg 77d(6).	gulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.						
When To File: A notice must be filed no later than 15 days after the first sale of securities in 1							

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 Avenue, 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.

SEC 1972 (5-05)

Potential 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.

1 of 9

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		A. BASIC IDE	NTIFICATION DATA	Aug.	
2. Enter the information re	equested for the f	ollowing:			
·		uer has been organized with	, ,		
					a class of equity securities of the issuer;
		corporate issuers and of co	rporate general and manag	ing partners of part	tnership issuers; and
		of partnership issuers.			
Check Box(es) that Apply:	☑ Promoter	⊠ Beneficial Owner     ■	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, Oak Hill Credit Or	•	s GenPar, L.P.			
Business or Residence Add	ress (Nur	nber and Street, City, State	e, Zip Code)		
201 Main Street, S	Suite 1910,	Fort Worth, Texa	as 76102		
Check Box(es) that Apply:	⊠ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or      Managing Partner
Full Name (Last name first, Oak Hill Credit Op		s MGP, LLC			
Business or Residence Add 201 Main Street, S	*	nber and Street, City, State Fort Worth, Texa	•		
Check Box(es) that Apply:	⊠ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
August, Glenn R.					
Business or Residence Add	ress (Nur	nber and Street, City, State	e, Zip Code)		
c/o Oak Hill Advis	ors, L.P., 6	35 East 55th Stre	et, 32nd Floor, N	New York, N	lew York 10022
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Bohnsack, Jr., W	Iliam H.				
Business or Residence Add		mber and Street, City, State 55 East 55th Stre		New York, N	lew York 10022
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)	·			

Business or Residence Address (I

Krase, Scott D.

Check Box(es) that Apply:

Business or Residence Address

Full Name (Last name first, if individual)

☐ Beneficial Owner

(Number and Street, City, State, Zip Code)

c/o Oak Hill Advisors, L.P., 65 East 55th Street, 32nd Floor, New York, New York 10022

(Number and Street, City, State, Zip Code)

□ Promoter

☐ Executive Officer

□ Director

☐ Director

☐ General and/or Managing Partner

☐ 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)

			Artistes Ethiologia		B. INFO	RMATIO	N ABOU'	T OFFER	ING			ii.		
1. Has t	he issuer so	ld, or does	the issue	r intend to	sell, to no	n-accredite	ed investor	s in this of	fering?				Yes	No ⊠
	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?													
2. What	is the minim	num invest	ment that	will be acc	epted from	any indiv	idual?						\$_5,000	<u>000¹</u>
3. Does	the offering	permit joir	nt ownersh	ip of a sing	gle unit?				•••••				Yes ⊠	No
<ol> <li>Does the offering permit joint ownership of a single unit?</li> <li>Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.</li> </ol>														
	(Last name rgan Se		•											
	r Residence rk Aver		•		-		e)							
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AL	All State	AZ	AR	CA]	CO	СТ	DE	DC	FL	[GA]	ΗÑ	 [an]	ui otatoo	
	IN	IA	KS	KY]	LA	ME	MD	MA	MI	MN	MS	MO		
MT	[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 Name	Full Name (Last name first, if individual)													
Business	or Residence	e Address	(Number a	and Street,	City, State	e, Zip Cod	e)							
Name of A	ssociated B	roker or D	ealer									·		
	Vhich Perso		-									🗆 🗗	All States	
AL	AK	ΑZ	AR	CA	CO	СТ	DE	DC	FL	GA	HI	ID		
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO		
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA		
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR		
Full Name	(Last name	first, if ind	ividual)											
Business	or Residenc	e Address	(Number a	and Street,	City, State	e, Zip Cod	e)			· -				
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
(Check "All States" or check individual States)														
[AL]	[AK]	[AZ]	AR	CA	CO	CT	DE	DC	FL	GA	HĪ			
[IL] [MT]	NE NE	IA NV	KS NH	NJ KY	LA NM	ME NY	MD NC	MA ND	МІ	OK	MS OR	MO PA		
RI	SC	SD	TN	TX	UT	VT	VA	WA	[WV]	WI]	WY]	PR		

<sup>1</sup> Which the General Partner may waive or increase in its sole discretion.

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

	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	_		\$ _N/A _
	Equity			\$ N/A
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$N/A		\$ N/A
	Partnership Interests			\$9,500,000
	Other (Specify)	\$ <u>N/A</u>		\$N/A
	Total			\$9,500,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
t	Enter the number of accredited and non-accredited investors who have purchased securities in a offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indice the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	ate		Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	88_		\$9,500,000
	Non-accredited Investors	0		\$0
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
5	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securi sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to first sale of securities in this offering. Classify securities by type listed in Part C —Question 1.			Dollar Amount
	Type of Offering	Security		Sold
	Rule 505	<u>N/A</u>		\$ <u>N/A</u>
	Regulation A	N/A		\$ <u>N/A</u>
	Rule 504	<u>N/A</u>		\$ <u>N/A</u>
	Total	<u>N/A</u>		\$N/A
	a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the issuance The information may be given as subject to future contingencies. If the amount of an expenditur not known, furnish an estimate and check the box to the left of the estimate.	uer.		
	Transfer Agent's Fees	••••••	$\boxtimes$	\$ <u> </u>
	Printing and Engraving Costs		$\boxtimes$	\$0
	Legal Fees		$\boxtimes$	\$ <u>46,340</u>
	Accounting Fees		$\boxtimes$	\$0
	Engineering Fees		$\boxtimes$	\$ <u> </u>
	Sales Commissions (specify finders' fees separately)		$\boxtimes$	\$
	Other Expenses (identify) Travel, Lodging, Meals		$\boxtimes$	\$_2,750
	Total		$\boxtimes$	\$ <u>49,090</u>

	b. Enter the difference between the aggrega and total expenses furnished in response to F proceeds to the issuer."			\$ <u>9,4</u>	50,910	
5.	each of the purposes shown. If the amount for	oss proceeds to the issuer used or proposed to be used for or any purpose is not known, furnish an estimate and check tall of the payments listed must equal the adjusted gross to Part C — Question 4 b above.				
	processes to the recess each to the time to expense		C Dir	yments to Officers, ectors, & Offiliates		ments to Others
	Salaries and fees		. 🗆 \$	N/A	_ 🗆 \$	N/A
	Purchase of real estate		. 🗆 \$	N/A	_ 🗆 \$	N/A
	Purchase, rental or leasing and installa					
					_ 🗆 \$	N/A
	• .	gs and facilities	. ∟↓\$	N/A	_ 🗆 \$	N/A
	offering that may be used in exchange	ng the value of securities involved in this for the assets or securities of another				
				N/A	_ 🗆 \$	N/A
	, ,			N/A	_	N/A
	• '			N/A	_ ⊠ \$ <u>9,4</u>	
	Other (specify):		□ \$	N/A	_ 🗆 \$	N/A
				<b>31/3</b>	_ ·	
					_ 🗆 \$	
	Column Totals		. ⊔\$_	N/A	_ ⊠ \$ <u>9,4</u>	50,910
	Total Payments Listed (column totals a	dded)		⊠ \$ <u>9,</u> 4	50,910	
		D. FEDERAL SIGNATURE	-	, I		
sig	s issuer has duly caused this notice to be sinature constitutes an undertaking by the iss	gned by the undersigned duly authorized person. If this issuer to furnish to the U.S. Securities and Exchange Corn-accredited investor pursuant to paragraph (b)(2) of Rule 56	nmission			
0	uer (Print or Type)  ak Hill Credit Opportunities  und, L.P.	Signature Alexa August	Date Octo	ber <u>/4</u> , :	2005	
Na	ne of Signer (Print or Type) enn R. August	Title of Signer (Print or Type)  Managing Member of Oak Hill Credit Oppo Ultimtate General Partner	rtuniti	es MGP, L	LC, the	
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		4.77517.5				
		ATTENTION —			<del></del>	
	Intentional misstatements or omi-	ssions of fact constitute federal criminal viola	ations.	(See 18	U.S.C. 1	001.)