FORM D

Type of Filing:

Name of Issuer

Address of Executive Offices

Brief Description of Business Private Equity Fund Type of Business Organization corporation

D business trust



Filing Under (Check box(es) that apply): ☐ Rule 504

New Filing

Enter the information requested about the issuer

390 Park Avenue, New York, New York 10022

Actual or Estimated Date of Incorporation or Organization:

Jurisdiction of Incorporation or Organization:

Wellspring Capital Partners IV, L.P.

Address of Principal Business Operations

(if different from Executive Offices)

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

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

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

(check if this is an amendment and name has changed, and indicate change.)

(check if this is an amendment and name has changed, and indicate change.)

Wellspring Capital Partners IV, L.P., a Delaware limited partnership, offering of

Amendment

OMB APPROVAL

FORM D TICE OF SALE OF SECURITIES RSUANT TO REGULATION D, SECTION 4(6), AND/OR A LIMITED OFFERING EXEMPTION	OMB Number:
Delaware limited partnership, offering of line of the limited partnership of line of the l	mited partnership interests.
A. BASIC IDENTIFICATION DATA	
er ent and name has changed, and indicate change.)	185/8
umber and Street, City, State, Zip Code) K 10022 Telephone No. (212) 318-	umber (Including Area Code) 9800
umber and Street, City, State, Zip Code) Telephone No	umber (Including Área Code)
	PPOCESSED
nership, already formed	NOV 16 2005
Month Year Dization: 0 4 0 5 ⊠ Actual □ Estimated (Enter two-letter U.S. Postal Service abbreviation for Stat CN for Canada; FN for other foreign jurisdiction)	e: THOMSON FINANCIAL P

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.

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.

limited partnership, already formed

limited partnership, to be formed

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.

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 10

Doc #:NY7:71865.1



A. BASIC IDENTIFICATION DATA 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 □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Feldman, Greg S. (Number and Street, City, State, Zip Code) Business or Residence Address 390 Park Avenue, New York, New York 10022 Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Mariano, David C. Business or Residence Address (Number and Street, City, State, Zip Code) 390 Park Avenue, New York, New York 10022 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Dawson, William F. Business or Residence Address (Number and Street, City, State, Zip Code) 390 Park Avenue, New York, New York 10022 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Stanton, Carl M. Business or Residence Address (Number and Street, City, State, Zip Code) 390 Park Avenue, New York, New York 10022 ☐ Promoter Check Box(es) that Apply: ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Fortin, Jason B. Business or Residence Address (Number and Street, City, State, Zip Code) 390 Park Avenue, New York, New York 10022 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☑ General and/or Managing Partner Full Name (Last name first, if individual) WCM GenPar IV GP, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 390 Park Avenue, New York, New York 10022 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Director ☐ Executive Officer ☑ General and/or Managing Partner Full Name (Last name first, if individual)

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

WCM GenPar IV, L.P.

Business or Residence Address

390 Park Avenue, New York, New York 10022

Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Credit Suisse First B	,				
Business or Residence Addi Eleven Madison Aver	(nber and Street, City, State k, New York 10010-			

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

						B. INFO	RMATIO	N ABOU	r offer	ING					
1.	Has the	issuer sol	d, or does	the issue	r intend to	sell, to nor	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.									\$ 10,000	,000*					
3.	. Does the offering permit joint ownership of a single unit?								Yes ⊠	No					
4.	4. 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.														
	Full Name (Last name first, if individual) Credit Suisse First Boston LLC														
Business or Residence Address (Number and Street, City, State, Zip Code) Eleven Madison Avenue, New York, New York 10010-3629															
			roker or De												
Stat					d or Intend I States)								🛛	All States	
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	O		
	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 (L	ast name	first, if indi	ividual)											
Bus	iness or I	Residence	Address	(Number a	and Street,	City, State	e, Zip Cod	e)							
Nan	ne of Ass	ociated B	roker or D	ealer	• • • • • • • • • • • • • • • • • • • •										
Stat					d or Intend I States)								🗆	All States	
	AL	AK	AZ	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 individual)															
Business or Residence Address (Number and Street, City, State, Zip Code)															
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	HI	ID		
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО		
	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		

^{*} The minimum investment accepted from any individual is subject to waiver by the General Partner.

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

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 \square 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	\$N/A	\$ <u>N/A</u>
	Equity	\$ N/A	\$N/A
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$N/A	\$ <u>N/A</u>
	Partnership Interests	\$ <u>1,000,000,000</u>	\$925.000.000
	Other (Specify)	\$N/A	\$N/A
	Total	\$1,000,000.000	\$925,000,000
	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."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	61	\$925,000,000
	Non-accredited Investors	0	\$ <u>0</u>
	Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>
	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	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505	N/A	\$ <u>N/A</u>
	Regulation A	N/A	\$N/A
	Rule 504	N/A	\$N/A
	Total	N/A	\$N/A
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		\$ <u>0</u>
	Printing and Engraving Costs		\$ <u>25,000</u>
	Legal Fees		\$350.000
	Accounting Fees		\$ <u>0</u>
	Engineering Fees		\$ <u>0</u>
	Sales Commissions (specify finders' fees separately)		\$4,500,000
	Other Expenses (identify)	_	\$50,000
	Total		\$4,925,000
		_	-

	and total expenses furnished in response to F	te offering price given in response to Part C — Question lart C - Question 4.a. This difference is the "adjusted grounds and a second sec	ss	\$995,075,000			
5.	each of the purposes shown. If the amount for	oss proceeds to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and chectal of the payments listed must equal the adjusted group or Part C — Question 4.b above.	ck				
			Directors, & Affiliates	Payments to			
	Salaries and fees		🗆 \$0	_ 🗆 \$0			
	Purchase of real estate		🗆 \$0	_ 🗆 \$0			
	Purchase, rental or leasing and installa and equipment	tion of machinery	🗖 \$0	_ 🗆 \$0			
		s and facilities					
	Acquisition of other businesses (includi offering that may be used in exchange	ng the value of securities involved in this for the assets or securities of another					
	•						
	, ,						
	•						
	Other (specify): Private Equity Investme	ents	_ 🗆 \$0	_ 🗆 \$0			
			_ 	፟ \$995.075.000			
	Column Totals		🗆 \$0	፟ \$995,075,000			
	Total Payments Listed (column totals a	dded)	🛚 🗷 😜	\$995,075,000			
		D. FEDERAL SIGNATURE					
sig	nature constitutes an undertaking by the iss	gned by the undersigned duly authorized person. If the suer to fumish to the U.S. Securities and Exchange (-accredited investor pursuant to paragraph (b)(2) of Rule	Commission, upon writte				
	uer (Print or Type) ellspring Capital Partners IV, L.P.	Signature D	^{ate} lovember <u>7</u> , 200	5			
	me of Signer (Print or Type) reg S. Feldman	Sole member of WCM GenPar IV GP, LL GenPar IV, L.P., the general partner of V					
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				·			
		ATTENTION					