# 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

OMB APPROVAL				
OMB Number:	3235-0076			
	April 30, 2008			
Estimated aver	age burden			
nours per respo	onse16.00			

SE	SEC USE ONLY				
Prefix	1	Serial			
DA1	E RECEI	VED 			

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Rockhill Holding Company, Common Stock, \$0.0001 par va	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	1347168
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Rockhill Holding Company	
Address of Executive Offices (Number and Street, City, State, Zip Code) 801 W. 47th Street, Suite 411	Telephone Number (Including Area Code) (816) 412-2801
Kansas City, Missouri 64112	
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 Holding company of insurance related businesses.	DEC 20 2005
Type of Business Organization  ☑ corporation ☐ limited partnership, already formed ☐ business trust ☐ limited partnership, to be formed	other (please specify): PROCESSE
Actual or Estimated Date of Incorporation or Organization:    Month   Year	

# **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.

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.

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.

		A. BASIC IDENT	IFICATION DATA					
2. Enter the information req	uested for the follo	owing:						
• Each promoter of the	• 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 offic	• 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								
Younghanz, Terry Business or Residence Addres		reet, City, State, Zip Coo	le)					
Rockhill Holding	Company							
801 W. 47th Stree								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if Buss, Jessica E.	individual)							
Business or Residence Address c/o Rockhill Hold 801 W. 47th Stree	ding Compar	ny		64112				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	Director	☐ General and/or Managing Partner			
Full Name (Last name first, if Goode, Joan E.	individual)				·_			
Business or Residence Addres c/o Rockhill Hold 801 W. 47th Stree	ding Compar	ny		64112				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if Parks, Richard	individual)							
Business or Residence Addres 2808 West 132 <sup>nd</sup> S Leawood, Kansas 6	treet	reet, City, State, Zip Coo	de)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if Rose, William	individual)							
Business or Residence Addres	s (Number and Str	eet, City, State, Zip Coo	le)					
HRK Investments	T. D							

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

□ Executive Officer

□ Director

☐ General and/or Managing Partner

300 Crescent Court, Suite 700, Dallas, Texas 75201

□ Beneficial Owner

□ Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply:

Estes, George

47 Sunset Farm Rd.

Full Name (Last name first, if individual)

West Hartford, CT 06107

### 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 individual) Tynan, Steven J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Northaven Associates, LLC 375 Park Avenue, New York, New York 10152 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Hart, Todd Business or Residence Address (Number and Street, City, State, Zip Code) HBK Investments, L.P. 300 Crescent Court, Suite 700, Dallas, Texas 75201 Check Box(es) that Apply: □ Promoter ☑ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) HBK Main Street Investments, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 300 Crescent Court, Suite 700 Dallas, Texas 75201 Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Northaven Associates, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 375 Park Avenue New York, New York 10152 ☐ Executive Officer ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ 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)

A. BASIC IDENTIFICATION DATA

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

Enter the information requested for the following:

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

2 of 8

											Yes	No
1. Ha	s the issuer so	old, or does	the issuer in	ntend to sell	, to non-acc	credited inve	stors in thi	s offering?	•••••			⊠
						if filing unc		· ·				
										•	\$ no	minimum
2. What is the minimum investment that will be accepted from any individual?												
	•									,	Yes	No
	es the offerin											⊠
co off wi	ter the inform mmission or fering. If a pe th a state or s rsons of such	similar ren erson to be l tates, list th	nuneration listed is an a ne name of	for solicitates sociated paths the broker of	tion of pur erson or ag or dealer. I	chasers in ent of a brol f more than	connection ker or deale five (5) pe	with sales or registered ersons to be	of securiti with the SI listed are a	es in the EC and/or		
	me (Last nam											
	ield Adv s or Residenc			d Street Cit	v State Zis	n Code)						
	s of Residenc Broadway						5					
	f Associated I				, -							
	ield Adv			1	. G. 11.11. D.	. 1			·			
	n Which Perso										_	
(C	heck "All Stat	tes" or chec.	k individual	States)						• • • • • • • • • • • • • • • • • • • •		All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[PA]
[RJ]	[SC]	[SD]	[TN]	(TX)	_ [UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last nam	e first, if inc	dividual)		,. <u>.</u>							
Busines	s or Residenc	e Address (	Number and	d Street, Cit	y, State, Zi	p Code)	<u> </u>					
Name o	f Associated l	Broker or D	ealer			<del></del>						
States i	n Which Perso	on Listed H.	as Solicited	or Intends t	o Solicit Pu	ırchasers						
	heck "All Stat											All States
						[CT]						
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[LA]	[CT] [ME]	[DE]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [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 Na	me (Last nam	e first, if in	dividual)							·	<u> </u>	
Busines	s or Residenc	e Address (	Number and	d Street, Cit	y, State, Zi	p Code)						
Name o	f Associated l	Broker or D	ealer				<del>_</del>					
States in	n Which Perso	on Listad U	as Solicited	or Intends t	o Solicit Pr	irchasers			·			
	heck "All Stat										_	All States
·				•								
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

B. INFORMATION ABOUT OFFERING

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

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 Pric		Ar	nount Already Sold
	Debt	\$		\$	
	Equity	\$ 108,7	19,884	\$ 1	.08,419,884
	☑ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	\$		\$	
	Other (Specify	\$		\$	
	Total	\$ 108,7	19,884	\$ 1	.08,419,884
	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."			•	D.II
		Number I	nvestors	Ag	gregate Dollar Amount of Purchase
	Accredited Investors		10	\$ 1	.08,419,884
	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.				N 4
	Type of Offering	Type of	Security	D	ollar Amount 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.	٠.		<u></u>	
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs	***************	🗆	\$	0
	Legal Fees	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	🛛	\$	115,000
	Accounting Fees		🗆	\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	3,671,607
	Other Expenses (identify)			\$	0
	Total			<u> </u>	3.786.607

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

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND USE OF PROCEEI	os
	b. Enter the difference between the aggregate offering price given in response to Part C - total expenses furnished in response to Part C - Question 4.a. This difference is the proceeds to the issuer."	"adjusted gross	\$104,933,277
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.	Payments to Officers,	
		Directors, & Affiliates	Payments to Others
	Salaries and Fees	<b>\$</b> 395,000	□ \$
	Purchase of real estate	□ \$	□ \$
	Purchase, rental or leasing and installation of machinery and equipment	□ \$	<u> </u>
	Construction or leasing of plant buildings and facilities	<b>\$</b>	□\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□\$1,367,953.60 □\$	D <u>⊠ \$31,334,584.4</u> 0 □ \$
	Working capital	\$	<b>△</b> \$ 71,835,739
	Other (specify):	<u> </u>	□ \$
	Column Totals  Total Payments Listed (column totals added)		□\$ <u>⊠</u> \$103,170,323.40 4,933,277
_	D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) or	e Commission, upon writt	
	uer (Print or Type) ockhill Holding Company	Date December /3,	2005
	me of Signer (Print or Type)  Erry L. Younghanz  Title of Signer (Print Type)  President		

## **ATTENTION**

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