SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549
FORM D
NOTICE OF SALE OF SECURITIES

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

OMB NUMBER: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response..........16.00



	A	
Name of Offering Deck if this is	s an amendment and name has changed, and indicate change	127780-
Offer and Sale of Limited Partnership Ir	nterests	13/2095
Filing Under (Check box(es) that apply)): □ Rule 504 □ Rule 505 ☒ Rule 506 □ S	Section 4(6) ULOE
Type of Filing: ☑ New Filing [☐ Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested abou	it the issuer	
Name of Issuer (Check if this is an	amendment and name has changed, and indicate change.)	
Resource Capital Fund IV L.P.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1400 Sixteenth Street, Suite 200 Denve	er, CO 80202	(720) 946-1444
Address of Principal Business Operation	ns (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)		
Brief Description of Business		PROCESSE:
Investment fund		
		AUG 10 2013 THOWSON FINANCIAL
Type of Business Organization		EINIANON
corporation	• • • •	other (please specify):
☐ business trust	☐ limited partnership, to be formed	
	Month Yea	ar
	0 7 0 6	
Actual or Estimated Date of Incorporati	*	✓ ✓ Actual ☐ Estimated
Jurisdiction of Incorporation or Organiz	ration: (Enter two-letter U.S. Postal Service abbreviation for	State:
	CN for Canada; FN for other foreign jurisdiction)	F N
		

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 state 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.

SEC 1972 (6-02) 1/019

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	□ Evecutive Officer	☐ Director	⊠ General and/or
		Belieficial Owlief	L'Accultée Officer	_ Director	Managing Partner
Full Name (Last name first, if inc	lividual)				
Resource Capital Associates IV I	P.				
Business or Residence Address	(Numbe	r and Street, City, State, Z	Zip Code)		
1400 Sixteenth Street, Suite 200,	Denver, CO 80202				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General Partner of the General Partner
Full Name (Last name first, if inc	lividual)	• • • • • • • • • • • • • • • • • • • •			
RCA IV GP L.L.C.					
Business or Residence Address	(Numbe	r and Street, City, State, 2	Zip Code)		
1400 Sixteenth Street, Suite 200,	Denver, CO 80202				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				managing rainiti
Brian T. Dolan					
Business or Residence Address	(Numbe	r and Street, City, State, 2	Cip Code)		
1400 Sixteenth Street, Suite 200,	Denver, CO 80202				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Code) Executive Officer	
Full Name (Last name first, if inc	dividual)				ivianaging i artifer
	•				
James T. McClements Business or Residence Address	Numbe	er and Street, City, State, 2	Zin Code)		
Dustiless of Residence Fragress	(rumoc	r und bireet, enty, blate, z	mp code)		
1400 Sixteenth Street, Suite 200,					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Henderson G. Tuten					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Lip Code)		
1400 Sixteenth Street, Suite 200,	Denver, CO 80202				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	□General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				Managing Parties
Ryan T. Bennett					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
1400 Sixteenth Street, Suite 200,	Denver, CO 80202				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				<u> </u>
Ross R. Bhappu					
Business or Residence Address	(Numbe	er and Street, City, State, 2	Zip Code)		
1400 Sixteenth Street, Suite 200,	Denver, CO 80202				<u> </u>

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Russell L. Cranswick					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
1400 Sixteenth Street, Suite 200), Denver, CO 80202	2			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
Ian C. Burvill					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
1400 Sixteenth Street, Suite 200), Denver, CO 80202	2			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Sherri Croasdale					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
157 Main Street, Cold Spring H	arbor, NY 11724				

	fall ak			B. INF	ORMATIO	N ABOUT	OFFERI	ΝG			1 10 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
1. Has the iss	uer sold, o	r does the is	suer intend	to sell, to	non accredit	ted investor	rs in this of	fering?				√o ⊠
•					Appendix,			-				_
0. 778							_				• • • • • • • • • • • • • • • • • • • •	
2. What is the		investment etion of the			from any in	idividual?		****************			\$ <u>10,000</u> Yes ?	7 <u>,000*</u> 70
3. Does the o					it?							1 0 □
4. Enter the i remuneration agent of a bro persons to be Full Name (La	for solicita ker or deal listed are a	tion of purc er registered ssociated p	chasers in co I with the S ersons of su	onnection v SEC and/or	vith sales of with a state	securities or states, l	in the offer ist the name	ing. If a pe of the bro	rson to be l ker or deale	isted is an er. If more	associated than five	l person or
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Asso	ciated Bro	ker or Deal	er									
States in Whi												
(Check "/ [AL]	All States" [AK]	or check ind [AZ]	dividual Sta [AR]	ates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	All States [ID]
[IL]	[IN]	[A2]	[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 (L				[]	[0-1		[]		(1 1	
`		•	, ,									
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Asso	ociated Bro	ker or Deal	er					_			-	
States in Whi	ch Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers		·				
•		or check in	_	1			_					All 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]	[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 (L.	ast name 11	rst, it indivi	iduai)									
Business or R	esidence A	ddress (Nu	mber and S	treet City	State Zin ('ode)						
Dusiness of I	icaldenee i	1441000 (114	moer and o	arcon, eng,	Diate, Dip	, ouc,						
Name of Asso	ociated Bro	ker or Deal	er									
ranic of risse	seiated Bro	Ker or Dear	C1									
States in Whi												A 11 C+-+
(Check "A [AL]	All States" [AK]	or check in [AZ]	dividual St [AR]	ates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	□ [HI]	All States [ID]
[KL]	[IN]	[A2]	[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]

(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

 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 \(\precedit{\text{and indicate in the columns below the amounts of the securities offered for exchange} \) and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold ☐ Common ☐ Preferred Convertible Securities (including warrants) \$\,\ 0\$ Partnership Interests \$550,000,000 \$382,050,000 Other (Specify ___ \$<u>0</u> Total \$550,000,000 \$ 382,050,000 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 Aggregate on the total lines. Enter "0" if answer is "none" or "zero." Number Dollar Amount Investors of Purchases Accredited Investors \$ 382,050,000 Non-accredited Investors \$ 0 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, 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 offering Type of Dollar Amount Security Sold Rule 505 N/A S N/A Regulation A N/A \$<u>N/A</u> Rule 504 N/A \$<u>N/A</u> N/A \$<u>N/A</u> 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 □ \$ 0 Legal Fees **⊠** \$ 300,000 Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) □ \$ 0 Total

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF P	ROCEEDS		- 10.12 (10.22) - 10.12 (10.20)
 b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." 			\$ <u>5</u>	49,600,000
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	P	ayments To Others
Salaries and fees	. 🛛	\$ <u>*</u>		\$ <u>0</u>
Purchase of real estate		\$ <u>0</u>		\$ <u>0</u>
Purchase, rental or leasing and installation of machinery and equipment		\$ <u>0</u>		\$_0
Construction or leasing of plant buildings and facilities	🗆	\$_0		\$_0
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)	_	\$_0	_	\$ 0
Repayment of indebtedness		\$ 0		\$ 0
Working Capital		\$ <u>0</u>		\$ <u>**</u>
• •				\$ **
Other (specify): Investments		\$_0	_	
Column Totals	⊠	\$ <u>*</u>	⊠	\$_**
Total Payments Listed (Column totals added)		⊠ \$_:	549 <u>,</u> 6	000,000
D. FEDERAL SIGNATURE	St. Facili		No.	
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this n following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exco of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragr	hange (Commission, up	on w	
ssuer (Print or Type) Signature		Date		
Resource Capital Fund IV L.P.		July		\$ 1, 2006
Name of Signer (Print or Type) Title of Signer (Print or Type)	1.0			6.1
Managing Member of RCA IV GP L.L.C., the General Issuer	i Partne	r of the General	Part	ner of the
		, , , , , , , , , , , , , , , , , , , 		

- * A management fee (the "Management Fee") will be paid by the Issuer annually to RCF Management L.L.C. Initially, the Management Fee will be in an annual amount equal to 2.0% of the aggregate subscriptions of the Issuer's limited partners.
- ** Unknown at this time.

- ATTENTION -

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