FORM D

UNITED STATE

SECURITIES AND EXCHANG Washington, D.C.



FORM D NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix]	Serial						
· -	DATE RECEI	VED						
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OMB APPROVAL

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April 30, 2008

QMB Number:

pires:

Name of Offering (check if this is an amendment and name has changed, and indica Midwood Capital Partners, L.P. limited partnership interests	ate change.)							
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 DATA								
Enter the information requested about the issuer								
Name of Issuer (check if this is an amendment and name has changed, and indicate Midwood Capital Partners, L.P.	e change.)							
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Midwood Capital Management LLC, 575 Boylston St., 4 th Floor, Boston, MA 02116 Telephone Number (Including Area Code) 617-224-1753								
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 Investments in securities	PROCESSED							
Type of Business Organization	MOV 2 0 0000							
☐ corporation ☐ limited partnership, already formed ☐ ☐	other (please specify): NOV 2 0 2006							
☐ business trust ☐ limited partnership, to be formed	THOMSON							
MONTH YEAR	FINANCIAL							
Actual or Estimated Date of Incorporation or Organization: 1 2 0 3	Actual							
Jurisdiction of Incorporation or Organization: (Enter two- letter U.S. Postal Service abbrev	riation for State:							
CN for Canada; FN for other foreign jurisdict	tion) D E							

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 seg. 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 the 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.

	富 排作的 2000年	A. BASIC IDENT	IFICATION DATA		
Enter the information Each prom power to vo	oter of the issuer, if	the issuer has been or	ganized within the past tion of, 10% or more of	five years; Each to a class of equity s	peneficial owner having the securities of the issuer;
issuers; an	d		rs and of corporate gen	eral managing pa	rtners of partnership
_	rai and managing pa	artnership of partnershi	p issuers. Respective Officer	☐ Director	General and/or
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	of Managing Partner	Director	Managing Partner
Full Name (Last name first, Midwood Capital Partn	ers, LLC				
Business or Residence Add 575 Boylston St., 4 th Flo		and Street, City, State, Zi 1116	p Code)		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer of Managing Partner	Director	General and/or Managing Partner
Full Name (Last name first, Folksamerica Reinsura	псе Сотрапу				
Business or Residence Add 1 Liberty Plaza, New Yo	1	and Street, City, State, Zi	p Code)		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, The Haebler Company	d/b/a Haebler Capi				
Business or Residence Add 8 Sound Shore Drive, G		and Street, City, State, Zi 30	p Code)		
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, Symetra Life Insurance	Company				
Business or Residence Add 777 109 th Ave. NE, Suite	ress (Number e 1200, Bellevue, V	and Street, City, State, Zi VA 98004-5135	p Code)		-
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, One Beacon Insurance					
Business or Residence Add One Beacon Street, Bo	•	and Street, City, State, Zi	p Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,					
Business or Residence Add	ress (Number	and Street, City, State, Zi	p Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,				·	
Business or Residence Add	ress (Number	and Street, City, State, Zi	p Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				<u> </u>
Business or Residence Add	ress (Number	and Street, City, State, Zi	p Code)		
	/Lleo blank eb	eet or conv and use addi	tional conies of this sheet	as necessary)	•

B. INFORMATION ABOUT OFFERING		
	Yes	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?		×
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?	\$50,00	00
3. Does the offering permit joint ownership of a single unit?	Yes ⊠	No □
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 purchases 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)		
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)	Ali St [Hi]	tates [ID] [MO] [PA] [PR] [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	🗀 All St	enton
(Check "All States" or check individual States)	[HI]	[ID]
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)	All St [HI] [MS] [OR] [OR] [WY] [MY] [OX]	ates [ID] [MO] [PA] [PR] [PR] [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

1. Enter the aggregate offering price of securities included in this offering and the total amount

		Aggregate	Amount Alread
	Type of Security	Offering Price	Sold
	Debt	\$ <u>0</u>	\$
	Equity	\$ <u>0</u>	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$ <u>0</u>	\$
	Partnership Interests	\$ <u>39,980,990</u>	\$ <u>39,980,990</u>
	Other (Specify)	\$	\$
	Total	\$ <u>39,980,990</u>	\$ <u>39,980,990</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities 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."	Number of	Aggregate Dollar Amoun of Purchases
	Accredited Investors	59	\$ <u>39,980,990</u>
	Non-accredited Investors	0	\$
	Total (for filing 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.	Type of	Dollar Amoun
	Type of offering	Security	Sold
	Rule 505.	·	\$
	Regulation A		\$
	Rule 504	·	\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of th 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>o</u>
			T &A
	Printing and Engraving Costs	[_ 4 <u>0</u>
	Printing and Engraving Costs		
	• • •	<u> </u>	3 \$ <u>25,000</u>
	Legal Fees	[2	₫ \$ <u>25.000</u> □ \$ <u>0</u>
	Legal Fees		☑ \$ <u>25,000</u> ☑ \$ <u>0</u> ☑ \$ <u>0</u>
	Legal Fees	[2 [2 [2 [2	3 \$ <u>25,000</u>] \$ <u>0</u>] \$ <u>0</u>] \$ <u>0</u>
	Legal Fees		\$ \$ <u>25,000</u>] \$ <u>0</u>] \$ <u>0</u>] \$ <u>0</u>] \$ <u>0</u>
	Legal Fees		\$ \$ <u>25,000</u>] \$ <u>0</u>] \$ <u>0</u>] \$ <u>0</u>] \$ <u>0</u>
	Legal Fees		\$ \$ <u>25,000</u>] \$ <u>0</u>] \$ <u>0</u>] \$ <u>0</u>] \$ <u>0</u>

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Intentional misetatements or omis	ATTENTIONsions of fact constitute federal criminal violation	ns. (See 18 U.S.)	C. 1001.)
			N.
David E. Cohen	Manager of Midwood Capital Management	LLC, Issuer's G	eneral Partner
Midwood Capital Partners, L.P. Name of Signer (Print or Type)	Title of Signer (Print or Type)	11/7/06	
Issuer (Print or Type)	Signature	Date	
following signature constitutes an underta	be signed by the undersigned duly authorized persaking by the issuer to furnish to the U.S. Securities and by the issuer to any non-accredited investor pur	and Exchange Co	ommission, upon written
A STATE OF THE STA	D. FEDERAL SIGNATURE		
Total Payments Listed (column t	totals added)	🛛	\$ <u>39,955,990</u>
Column Totals		🗖 \$ <u>0</u>	□ \$ 39,955,990
Other (specify): Investments in s	securities	🗆 \$ <u>Q</u>	⊠ \$ <u>39,955,990</u>
Working capital		🗖 \$ <u>Q</u>	□ \$ <u>0</u>
Repayment of indebtedness		🗆 \$ <u>0</u>	□ \$ <u>0</u>
that may be used in exchange for	or the assets or securities of another issuer pursuan	t	□ \$ <u>0</u>
	buildings and facilitiesduding the value of securities involved in this offerir		□ \$ <u>0</u>
Purchase, rental or leasing and	installation of machinery and equipment	🗆 \$ <u>0</u>	□ \$ <u>0</u>
Purchase of real estate		🗀 \$ <u>0</u>	□ \$ <u>0</u>
Salaries and fees		🗀 \$ <u>0</u>	□ \$ <u>0</u>
4 days a second and a second a		Óffi Direc	ents to cers, tors, & Payments To iates Others
equal the adjusted gross proceeds to above.	o the issuer set forth in response to Part C- Question	on 4.b.	
used for each of the purposes shown estimate and check the box to the lef	usted gross proceeds to the issuer used or propose i. If the amount for any purpose is not known, furnis it of the estimate. The total of the payments listed n	sh an nust	· ·

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

1.	Is any party described in 17 CFR 2	30.262 presently subject to any disqualification provisions of such rule?	Yes	No ⊠					
	9	See Appendix, Column 5, for state response.							
2.		dertakes to furnish to any state administrator of any state in which this not i) at such times as required by state law	ice is file	d, a					
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	Uniform Limited Offering Exemption	that the issuer is familiar with the conditions that must be satisfied to be en (ULOE) of the state in which this notice is filed and understands that the sthe burden of establishing that these conditions have been satisfied.							
5.	The issuer has read this notification behalf by the undersigned duly aut	n and knows the contents to be true and has duly caused this notice to be horized person.	signed o	on its					
Issuer	Print or Type)	Signature Date							
Midwo	od Capital Partners, L.P.	1/1/06							
Name (Print or Type)	Title (Print or Type)							
David I	E. Cohen	Manager of Midwood Capital Management LLC, Issuer's General P	artner						

E. STATE SIGNATURE

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.

APPENDIX

The State of the state of the

1	Intend to r		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)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL				1111001010	\$		\$			
AK					\$	<u>-</u>	\$			
ΑZ					\$		\$			
AR		⊠	Limited Partnership interests - \$150,000	1	\$ <u>150,000</u>	0	\$ <u>0</u>		⊠	
CA		Ø	Limited Partnership Interests - \$2,185,000	5	\$ <u>2,185,000</u>	0	\$ <u>0</u>		☒	
СО		☒	Limited Partnership Interests - \$500,000	1	\$ <u>500,000</u>	0	\$ <u>0</u>		⊠	
СТ		×	Limited Partnership Interests – \$3,575,000	5	\$ <u>3,575,000</u>	0	\$ <u>0</u>		⊠	
DE			Limited Partnership Interests – \$1,000,000	1	\$ <u>1,000,000</u>	0	\$ <u>0</u>	0	⊠	
DC		×	Limited Partnership Interests – \$1,500,000	1	\$ <u>1,500,000</u>	0	\$ <u>0</u>		☒	
FL		×	Limited Partnership Interests – \$100,000	1	\$ <u>100,000</u>	0	\$ <u>0</u>		⊠	
GA					\$		<u> </u>			
н					\$		\$			
۵۱		☒	Limited Partnership interest \$100,000	1	\$ <u>100,000</u>	0	\$ <u>0</u>			
ΙL		Ø	Limited Partnership Interest – \$2,050,000	2	\$ <u>2.050,000</u>	0	\$ <u>0</u>		⊠	
IN			:		\$		\$			
IA					\$		\$			
KS					\$		\$			
KY					\$		\$			
LA					\$		\$			
ME			;		\$		\$			
MD					\$		\$			
MA		☒	Limited Partnership interests - \$9,370,000	21	\$ <u>9,370,000</u>	0	\$ <u>0</u>		Ø	
МІ					\$		\$			
MN					\$		\$			
MS					\$		\$			
МО					\$		\$			

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	.74				***************************************	

	Intend to r	to sell	3					l <u>-</u>	
	to r						Disqualification under State ULOE		
	accre	ion-	Type of Security and aggregate					(if yes,	attach
ì I	investors	edited s in State	offering price offered in state			vestor and nased in State		explanation of waiver granted)	
		-Item1)	(Part C-Item 1)			-Item 2)		(Part E-Item 1)	
	.,			Number of Accredited	A	Number of Non- Accredited	A-	V	No
State MT	Yes	No.		Investors	Amount \$	Investors	Amount \$	Yes	
NE			·		\$		<u> </u>		
NV					\$		\$		
NH					\$		\$		
NJ		⊠	Limited Partnership	2	\$2,250,000	0	\$ <u>0</u>		
 	ļ		interests - \$2,250,000		\$		\$		
NM			Limited Partnership					 	\vdash
NY		Ø	interests - \$6,200,000	9	\$ <u>6,200,000</u>	0	\$0		<u> </u>
NC					\$		<u> </u>		
ND					\$		\$		
ОН		Ø	Limited Partnership interest - \$150,000	1	\$ <u>150,000</u>	0	\$ <u>0</u>		☒
ок					\$		\$		
OR				· •===	\$		\$		
PA		⊠	Limited Partnership interest - \$100,000	1	\$ <u>100,000</u>	0	\$ <u>0</u>		⊠
RI					\$		\$		
sc					\$		\$		
SD					\$		\$		
TN					\$		\$		□.
тх		⊠	Limited Partnership interests - \$4,304,000	4	\$ <u>4,304,000</u>	0	\$0		⊠
UT					\$		\$		
VT					\$		\$		
VA					\$		\$		
WA		Ø	Limited Partnership interests - \$5,947,000	2	\$ <u>5,947,000</u>	0	\$ <u>0</u>		Ø
wv					\$		\$		
WI					\$		\$		
WY					\$		\$		
PR					· \$		\$		
Other			Limited Partnership interests - \$499,990	1	\$ <u>499,990</u>	0	\$ <u>0</u>		Ø

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