# **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	<b>APPROVAL</b>
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OMB Number:

3235-0076

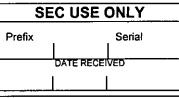
Expires:

April 30, 2008

Estimated average burden

hours per response

16.00



Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Numeric Small Cap Core Onshore Fund I, L.P limited partnership interests									
Filing under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506  Type of Filing: ☐ Amendment	Section 4(6) ULOE								
A. BASIC IDENTIFICATION DATA									
Enter the information requested about the issuer	10.								
Name of Issuer ( check if this is an amendment and name has changed, and indicate Numeric Small Cap Core Onshore Fund I, L.P.	e change.)								
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Numeric Investors LLC One Memorial Drive, Cambridge, MA 02142	Telephone Number (Including Area Code) 617-577-1166								
Address of Principal Business Operations (Number and Street, City, State Zip Code) (if different from Executive Offices)  Brief Description of Business	Telephone Number (Including Area Code)								
Brief Description of Business Investments in securities	<b>1</b>								
Type of Business Organization									
☐ corporation ☐ limited partnership, already formed ☐ COMSUN	other (please specify):								
☐ business trust ☐ limited partnership, to be formed ☐ Indicate ☐									
Actual or Estimated Date of Incorporation or Organization:    O   2   0   7									
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.

2. Enter the information i	•	•	ganized within the nast	five years: Each	beneficial owner having the			
					securities of the issuer;			
issuers; and		ector of corporate issue	, -	neral managing pa	artners of partnership			
		artnership of partnersh						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	□ General and/or Managing Partner			
Full Name (Last name first, if i Numeric Investors LLC								
Business or Residence Addres One Memorial Drive, Can	,	r and Street, City, State, Z <b>42</b>	ip Code)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner			
Full Name (Last name first, if i Even, Michael	ndividual)							
Business or Residence Addresc/o Numeric Investors LL		r and Street, City, State, Z al Drive, Cambridge, N		·				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner			
Full Name (Last name first, if i Wheeler, Langdon	ndividual)							
Business or Residence Addres c/o Numeric Investors LL		r and Street, City, State, Zi al Drive, Cambridge, N						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if i Journas, Raymond	ndividual)							
Business or Residence Addres c/o Numeric Investors LL		r and Street, City, State, Zi al Drive, Cambridge, N						
Check Box(es) that Apply:	☐ Promoter	□ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner			
Full Name (Last name first, if individual)  Forest Lawn Memorial Parks Association, as Trustee for the Forest Lawn Endowment and Special Care Funds of Greendale/Hollywood Hills, Covina Hills, Cypress, Long Beach, and Cathedral City								
Business or Residence Addres 1712 South Glendale Ave		r and Street, City, State, Zi CA 91205	p Code)					
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first, if in The Public Institution for	Social Security	<u> </u>						
Business or Residence Addres c/o Strategic Investment		r and Street, City, State, Ziternational L.P., 100 19		Floor, Arlington,	VA 22209			
Check Box(es) that Apply:	☐ Promoter	□ Beneficial Owner	☐ Executive Officer	Director	<ul><li>General and/or Managing Partner</li></ul>			
Full Name (Last name first, if it SIM U.S Equity Trust	,							
Business or Residence Address c/o Strategic Investment		r and Street, City, State, Ziternational L.P., 100 19		Floor, Arlington,	VA 22209			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if it Olin Pension Plans Maste		ust			_			
Business or Residence Addres 50 LaSalle St., Chicago, I		r and Street, City, State, Zi	p Code)	******				
	(Use blank st	neet, or copy and use addi	tional copies of this sheet,	, as necessary.)				

A. BASIC IDENTIFICATION DATA

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	B. INFORMATION ABOUT OFFERING									
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?	\$ <u>1,00</u>	\$ <u>1,000,000</u>							
3.	Does the offering permit joint ownership of a single unit?	Yes	No □							
4.										
Full N/A	Name (Last name first, if individual)									
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)									
Nar	me of Associated Broker or Deater		-							
	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers									
(Ch	neck "All States" or check individual States)	☐ All St III ☐	ates							
[וL]	$\square$ [IN] $\square$ [IA] $\square$ [KS] $\square$ [KY] $\square$ [LA] $\square$ [ME] $\square$ [MD] $\square$ [MA] $\square$ [MI] $\square$ [MN] $\square$ [N	1Š} □	[MÒ] □							
[MT] [RI]		R)   VY)	[PA]     [PR]							
	Full Name (Last name first, if individual)									
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)									
Nar	me of Associated Broker or Dealer									
	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers									
(Ch	neck "All States" or check individual States)	☐ All St II] □	tates [ID] 🔲							
[IL]	$\square$ [IN] $\square$ [IA] $\square$ [KS] $\square$ [KY] $\square$ [LA] $\square$ [ME] $\square$ [MD] $\square$ [MA] $\square$ [MI] $\square$ [MN] $\square$ [N	ısı 🔲	[MO] 🔲							
[MT] [RI]		OR] □ VYI □	[PA]							
	l Name (Last name first, if individual)		<del></del>							
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)									
Nar	me of Associated Broker or Dealer									
Sta	ites in Which Person Listed Has Solicited or Intends to Solicit Purchasers									
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[AL] [IL]		(I) ∐ (IS) □	[ID]   [MO]							
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[RI] [RI]		₩ 🖁								

(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 already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box 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 Debt..... \$0 <u>\$0</u> \$<u>0</u> Equity ..... \$<u>0</u> Preferred ☐ Common \$0 Convertible Securities (including warrants) \$0 \$80,000,000 \$80,000,000 Partnership Interests Other (Specify \_\_\_ \$0 Total ..... \$80,000,000 \$80,000,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in Aggregate this offering and the aggregate dollar amounts of their purchases. For offerings under Rule Number of **Dollar Amount** 504, indicate the number of persons who have purchased securities and the aggregate dollar Investors of Purchases amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." \$80,000,000 6 Accredited Investors Non-accredited Investors ..... 0 \$0 Total (for filing under Rule 504 only) ...... Answer also in Appendix, Column 4, if filing under ULOE. 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. **Dollar Amount** Type of Security Type of offering Sold Rule 505. Regulation A. .... Rule 504. Total..... 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. Accounting Fees. Engineering Fees. Other Expenses (identify) \_

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Total ...... 🛛 \$12,000

\$79,988,000

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."

<ol><li>Indicate below the amount of the adju- used for each of the purposes shown estimate and check the box to the lef</li></ol>	ICE, NUMBER OF INVESTORS, EXPE usted gross proceeds to the issuer used. If the amount for any purpose is not ke t of the estimate. The total of the payme to the issuer set forth in response to Part	or proposed to be nown, furnish an ents listed must	, <u>, , , , , , , , , , , , , , , , , , </u>
		Öffi Direc	nents to cers, ttors, & Payments To liates Others
Salaries and fees		🗀 \$ <u>0</u>	<b>□ \$</b> <u>0</u>
Purchase of real estate		🗆 \$ <u>0</u>	<b>□ \$</b> <u>0</u>
Purchase, rental or leasing and i	nstallation of machinery and equipment	🗆 \$0	□ \$ <u>0</u>
Acquisition of other business (inc	ouildings and facilities	n this offering	☐ \$ <u>0</u>
	r the assets or securities of another issu		<b>□</b> \$ <u>0</u>
Repayment of indebtedness		□ \$0	<b>□</b> \$ <u>0</u>
Working capital	•••••	🗆 \$0	<b>□ \$</b> <u>0</u>
Other (specify): investments in s	ecurities	□ \$0	<b>⋈</b> \$ <u>79,988,000</u>
Column Totals		□ \$0	<b>⋈</b> \$ <u>79,988,000</u>
Total Payments Listed (column t	otals added)	×	\$ <u>79,988,000</u>
	D. FEDERAL SIGNATUR	RE	
The issuer has duly caused this notice to following signature constitutes an underta request of its staff, the information furnish	king by the issuer to furnish to the U.S.	Securities and Exchange C	ommission, upon written
Issuer (Print or Type) Numeric Small Cap Core Onshore Fund I, L.P.	Signature Raymond J Jam	Date	
Name of Signer (Print or Type) Raymond Journas	Title of Signer (Print or Type)  Managing Director and CFO of N	lumeric Investors LLC, its	General Partner
	ATTENTION		
Intentional misstatements or omiss	sions of fact constitute federal crimin	nal violations. (See 18 U.S.	C. 1001.)

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 23 provisions of such rule?	30.252(c), (d), (e) or (f) presently subject to any disqualification			No ⊠				
		See Appendix, Column 5, for state response							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law								
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
5.	The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.								
Issuer (	Print or Type)	Signature	Date						
Numeri	c Small Cap Core Onshore	Signature Raymond Journal	Date July 11, 2007						
Fund I,	L.P.								
Name (	Print or Type)	Title (Print or Type)							
Raymond Journas		Managing Director and CFO of Numeric Investors LLC, its General Partner							

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.

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APPEN	שו	١X
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1	Intend to r accre investors	I to sell non- edited s in State	3 Type of Security and aggregate offering price offered in state (Part C-Item 1)	4  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							<del>-</del> -		
AK									
AZ									
AR				-					
CA		×	Limited partnership interests - \$10,000,000	1	\$10,000,000	0	0		⊠
СО									
СТ									
DE									
DC									
FL									
GA									
Hi									
ID									
IL.			Limited partnership interests - \$15,000,000	1	\$15,000,000	0	0		⊠
IN									
IA									
KS									
KY									
LA			i 						
ME									
MD									
МА									
МІ									
MN									
MS									
МО									

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Δ	P	P	F	N	D	ΙX

1	to accr inves Si	2 d to sell non- edited stors in tate 3-ltem1)	3 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)	
PA-4-	V	Na		Number of Accredited Investors	Amaunt	Number of Non- Accredited Investors	Amount	Yes	No
State MT	Yes	No 🗆		Investors	Amount	Investors	Amount		
NE NE	]								
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ок							·		
OR									
PA		X	Limited partnership interests - \$5,000,000	1	\$5,000,000	0	0		$\boxtimes$
RI									
sc				•					
SD									
TN									
тх									
UT									
VT			_						
VA		×	Limited partnership interests - \$44,700,000	1	\$44,700,000	o	0		Ø
WA									
wv									
WI									
WY									
PR									
Other		×	Limited partnership interests - \$5,300,000	1	\$5,300,000	0	0		×

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