FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION , Washington, DC 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 Expires: November 30, 2001 Estimated average burden hours per response . . . 16.00

SEC USE ONLY					
Prefix	Serial				
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DATE RE	CEIVED				
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Type of Filing: ☑ New Filing ☐ Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

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

Name of Offering (check if this is an amendment and name has changed, and indicate change.) The LCM Trust The Large Cap Equity Fund series units of beneficial interest Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐ Section 4(6) ☐ ULOE

The LCM Trust

Address of Executive Offices (Number and Street, City, State, Zip Code)

Telephone Number (Including Area Code)

c/o Mellon Trust of Delaware, National Association, Trustee, 4005 Kennett Pike, Ste.

250, Greenville, DE 19801

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

Investment Fund

Type of Business Organization

☐ corporation □ business trust

☐ limited partnership, already formed ☐ limited partnership, to be formed

FINANCIAL

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☐ other (please specify): Statutory Trust

Year

6

Actual or Estimated Date of Incorporation or Organization:

1

☑Actual

☐ Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State;

CN for Canada; FN for other foreign jurisdiction)

 $\square\square$ DE

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

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 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.

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:	r 🔲 Beneficial Owner	☐ Executive Officer and President	☑ Trustee	☐ General and/or Managing Partner Managing Member
Full Name (Last name first, if individual)				Winning My House
Mellon Trust of Delaware, Nat	ional Association			
Business or Residence Address (Number	and Street, City, State, Zip Code)			- 1
4005 Kennett Pike, Ste. 250, G	reenville, DE 19801			
Check Box(∞) that Apply: ☐ Promote	r ☑ Sponsor	☐ Executive Officer -	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Lotsoff Capital Management				
Business or Residence Address (Number	and Street, City, State, Zip Code)			
20 North Clark Street, 34th Floor	or, Chicago, IL 60602		_	
Check Box(es) that Apply:		□Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				1 1 1 1
Business or Residence Address (Number	and Street, City, State, Zip Code)			
Check Box(es) that Apply:	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)			
Check Box(⊗) that Apply: ☐ Promote	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			<u></u>	
Business or Residence Address (Number	and Street, City, State, Zip Code)			
Check Box(es) that Apply:	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)			
Check Box(es) that Apply:	r 🔲 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)			

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1. Has	the iss	uer sold	or does	s the issu	ier inten	d to sell	l, to non	-accred	ited inv	estors i	n this o	ffering?				Yes	No ☑
						Ansv	ver also	in App	endix, (Column	2, if fil	ing under	ULOE.				
2. Wh	at is the	minim	um inve	estment t	hat will	be acce	pted fro	m any i	individ	ua1?						\$1 <u>,000,0</u>	00.00
3. Doi	es the o	ffering 1	ermit i	oint own	ershin o	fa sino	le unit?									Yes ☑	No
						Ū		h	3H L				:_ 4:4:		!!1	_	_
p ai	urchase nd/or w	rs in co ith a sta	nnection te or sta	n with sa	ales of s the nam	ecuritie e of the	s in the broker	offerin	g. If a	person	to be li	sted is an	associated perso	on or agent of	a broker or	dealer registere	er solicitation of ad with the SEC der, you may set
Full N	lame (L	ast nam	e first. i	if individ	lual)												
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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 offer- ing, check this box □ and indicate in the column below the amounts of the securities of- fered for exchange and already exchanged. 		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	s	S
Equity		\$
	•	•
Convertible Securities (including warrants)	\$ \$	\$ \$
Other (Specify units of beneficial interests of series of Trust interests)		-
	\$200,000,000*	\$33,989,903.61
Total	\$ <u>200,000,000*</u>	\$ <u>33,989,903.61</u>
Answer also in Appendix, Column 3, if filing under ULOE		
* This amount is an estimate. There is no maximum amount to be raised.		
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."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	15	s33,989,903.61
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		s
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 offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		S
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.		
Transfer Agent's Fees		s
Printing and Engraving Costs		\$ <u>15,000.00</u>
Legal Fees		\$20,000.00
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (Specify finder's fees separately)		\$
Other Expenses (identify) Filing Fees; postage; travel, etc	🗹	\$15,000.00_
Total	M	\$50,000,00

b. Enter the difference between the aggregate offer		CPE	NSES AND		
Question 1 and total expenses furnished in resp is the "adjusted gross proceeds to the issuer.".			\$ <u>199,950</u>) <u>,000.00*</u>	
 Indicate below the amount of the adjusted gross pro- used for each of the purposes shown. If the amour an estimate and check the box to the left of the est must equal the adjusted gross proceeds to the issu- tion 4.b. above. 	it for any purpose is not known, furnish imate. The total of the payments listed				
		I	Payments to		
			Officers, Directors, & Affiliates	Pa	yments To Others
Salaries and fees			s	🗅 s_	<u></u>
Purchase of real estate			\$	□ s_	
Purchase, rental or leasing and installation	of machinery and equipment		s		
Construction or leasing of plant buildings	and facilities		\$	□ s_	
Acquisition of other businesses (including offering that may be used in exchange for	the assets or securities of another issuer	_		_	
pursuant to a merger			2	_	<u></u>
Repayment of indebtedness			2		
Working capital			2	_	99,950,000.00•
Other (specify)			s	□ s_	
			_		
			\$		00.050.000.00
			s	_	99,950,000.00*
Total Payments Listed (column totals add	ed)	•••••••	. 🗹	s <u>199,950,00</u>	0.00*
* This amount is an estimate. There is no maximum	amount to be raised.				
	D. FEDERAL SIGNAT	URE	E		
The issuer has duly caused this notice to be signed by undertaking by the issuer to furnish to the U.S. Se non-accredited investor pursuant to paragraph (b) (2)	curities and Exchange Commission, upon writ	is notic ten req	ce is filed under R uest of its staff, th	ule 505, the foll ne information (owing signature constitutes an urnished by the issuer to any
Issuer (Print or Type)	Signature 1 Land		-Date		
The LCM Trust	TAN I I THIN)	D_{γ}	بااسلين	7002
Name of Signer (Print or Type)	Title of Signer (Print or Type)		1=1-1	9	, , , , , , , , , , , , , , , , , , , ,
Rich DeMatteo	Managing Director of Lotsoff Cap for The LCM Trust	ital N	/anagement, S	ponsor and	Investment Manager
	ATTENTION			ENI)
Intentional misstatements or omissions of fact con	stitute federal criminal violations. (See 18 U.S	S.C. 100	01.)		