### FORM D

SEC 1972 (6/02):

Potential persons who are to 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.

# UNITED STATES

SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## **FORM D**

NOTICE OF SALE OF SECURITIES AUG 3 1 2007
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	OMB APPROVAL							
	OMB Number:	3235-0076						
	Expires:	April 30, 2008						
1	Estimated average burden							
1	COURS DET FESTIO	nce 16						

SEC USE ONLY
Prefix Serial

DATE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)						
Private Placement of Units of Membership Interest						
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)						
Type of Filing: New Filing  Amendment FINAL						
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.)						
Outland Renewable Energy, LLC						
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)						
207 N. Chestnut Street, Suite 225, Chaska, Minnesota 55318 (952) 442-5443						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number Manual Code)						
(if different from Executive Offices)						
Brief Description of Business						
Develop, own and operate one or more wind energy generation facilities						
Type of Business Organization 07076308						
☐ corporation ☐ limited partnership, already formed ☐ other (please specif.						
business trust limited partnership, to be formed Limited liability company						
Month Year						
Actual or Estimated Date of Incorporation or Organization: [0][4] [0][5] 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) [M][N]						
CENEDAL INCEDICTIONS						

#### GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation D</u> 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 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 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 in 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 DACKO IDENIGIE	TO A TION DATA						
2. Enter the information req	vected for the follo	A.BASIC IDENTIF	ICATION DATA						
•		•	the nast five years:						
•	•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;									
	· ·	•	orate general and managin	g partners of parti	nership issuers; and				
•Each general and manage	<del></del>								
Check Box(es) that Apply:	☑ Promoter	☑ Beneficial Owner	Executive Officer	⊠ Governor	General and/or Managing Partner				
Full Name (Last name first,	if individual)								
Fultz, Dennis									
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Coo	de)						
12167 Aspen Ave., Tracy, M	N 56175								
Check Box(es) that Apply:	☑ Promoter	Beneficial Owner	Executive Officer	☑ Governor	General and/or Managing Partner				
Full Name (Last name first,	if individual)			5, 4					
Melone, Thomas			, 1, \$						
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Co	de)						
207 N. Chestnut Street, Suit	e 225, Chaska, MN	V 55318							
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	Executive Officer	☑ Governor	General and/or Managing Partner				
Full Name (Last name first,	if individual)								
Wavle, James	•								
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Co	de)						
207 N. Chestnut Street, Suit	e 225, Chaska, MN	N 55318	•						
Check Box(es) that Apply:	Promoter		Executive Officer	Governor	General and/or Managing Partner				
Full Name (Last name first, Rustowicz, Daniel									
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Co	de)		· · · · · · · · · · · · · · · · · · ·				
207 N. Chestnut Street, Suit			•						
Check Box(es) that Apply:	☑ Promoter	Beneficial Owner	Executive Officer	Governor	General and/or Managing Partner				
Full Name (Last name first,	if individual)								
Scott, Steve	,								
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Co	de)	•	· · · · · · · · · · · · · · · · · · ·				
207 N. Chestnut Street, Suit	•	•	,						
Check Box(es) that Apply:	⊠ Promoter .	☑ Beneficial Owner	Executive Officer	Governor	General and/or Managing Partner				
Full Name (Last name first,	if individual)								
-Allsup, Jay	<b></b>								
Business or Residence Addr	ess (Number and !	Street, City, State, Zin Co.	de)						
207 N. Chestnut Street, Suit	•								
worms caesting Street Salt	₹££₽, €H#\$K#, I¥II	4 STOTE							

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

100	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* · · · · ·	B. IN	FORMAT	ION ABO	OUT OFF	ERING		,		**
1. Has the		i, or does	the issuer	intend to s	ell, to non	-accredite	d investors	s in this of	fering?		Yes	No
Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?  *Company reserves the right to accept lesser amounts.								\$ <u>.5(</u>	) <u>,000*</u>			
3. Does the offering permit joint ownership of a single unit?								Yes	No			
commis offering and/or v associat	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 purchasers 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 nam	e first, if i	ndividual)									
NONE Business or	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	de)					
Name of A	ssociated l	Broker or	Dealer									
States in W	hich Perso	on Listed	Has Solicit	ted or Inte	nds to Soli	icit Purcha	asers					
(Check "A	All States"	or check	individual	States)	•••••					•••••		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	(Last nam	e first, if i	ndividual)									
Business of	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	de)					
Name of A	ssociated l	Broker or	Dealer					·				
States in W												
-	All States"			•								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]	[N1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last nam	e iirst, if i	naiviauai)									
Business of	r Residenc	e Address	(Number	and Street	t, City, Sta	te, Zip Co	ode)				<del></del>	-
Name of A	ssociated	Broker or	Dealer									
States in W												
(Check "A	All States"	or check	individual	States)	•••••	•••••		••••	•••••	•••••		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]	IUTI	[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 PROCEED	0
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.		
	Type of Security	Aggregate	Amount Already
		Offering Price	Sold
	Debt\$		\$
	Equity\$	<u> </u>	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	}	\$
	· · · · · · · · · · · · · · · · · · ·		\$
	Other (Specify <u>Units of LLC Membership Interest</u> )	1,000,000	\$ 435,000
		_	
		1,000,000	\$435,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased		
۷٠	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."		
			Aggregate
		Number	Dollar Amount
		Investors	of Purchases
	Accredited Investors	6	\$435,000
	Non-accredited Investors.	_	\$
	Total (for filings under Rule 504 only)	6	\$ 435,000
	Answer also in Appendix, Column 4, if filing under ULOE.	<u>~</u>	Ψ <u>433(000</u>
	Allswer also in Appendix, Column 4, it thing under OLOE.		
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 Amount
	Type of offering	Security	Sold
	Rule 505	<u>N/A</u>	\$
	Regulation A	<u>N/A</u>	\$
	Regulation 504	N/A	\$
	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		\$
	Printing and Engraving Costs		\$
	Legal Fees	$\boxtimes$	\$\$
	Accounting Fees		\$
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fee separately)		\$
	Other Expenses (identify)		\$
	Total		\$ 15,000

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USI	E OF PROCEEDS	
	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."	\$_	985,000
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	Payments To Others
	Salaries and fees	□ \$	
	Purchase of real estate		
	Purchase, rental or leasing and installation of machinery and equipment   \$ \begin{align*}	🔲 💲	
	Construction or leasing of plant building and facilities	🗆 \$_	
	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)		
	Working capital	⊠ s³-	985,000
	Osh an (	🖾 Ψ_	763,000
	Other (specify:		
•		□ \$	
•	Column Totals	🗵 🕏 s -	985,000
	Total Payments Listed (column totals added)	<b>⊠</b> \$ 985,000	
	D. FEDERAL SIGNATURE		
he fo	ssuer has duly caused this notice to be signed by the undersigned duly authorized person. It bllowing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities request of its staff, the information furnished by the issuer to any non-accredited investigation.	s and Exchange Comr	nission, upon
	r (Print or Type) Signature	Date	•
	and Renewable Energy, LLC	8-22-	2007
	e of Signer (Print or Type)  Title of Signer (Print or Type)		
Jay A	Ilsup Chief Phancial Officer		
		$\mathcal{END}$	)
	ATTENTION		
	Intentional misstatements or omissions of fact constitute federal criminal violation	as. (See 18 U.S.C. 100	1).