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FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

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

OMB APPROVAL OMB Number: 3235-0076 Expires: Estimated average burden hours per response. 16.00

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Name of Offering (check if this is, an amer	ndment and name has changed, and in	dicate change.)		
\$15,200,000 Bear Creek Certificates Trus	t (Non-AMT) Series 2007-1		•	
Filing Under (Check box(es) that apply):		6 Section 4(6)	ULOE	
Type of Filing: New Filing Amendr			ш	
- 4 4				(
	A. BASIC IDENTIFICAT	ION DATA		07077477
1. Enter the information requested about the is	ssuer			
Name of Issuer (check if this is an amendm	nent and name has changed, and indic	ate change.)		
Bear Creek Certificates Trust (Non-AMT) S	Series 2007-1, c/o Bear Creek M	anagement, LLC, a	as Trustor	
Address of Executive Offices	(Number and Street, City	, State, Zip Code)	Telephone i	Number (Including Area Code)
The Tabor Center, 1200 17th St., Ste. 970	, Denver, Colorado 80202			
Address of Principal Business Operations	(Number and Street, Cit	y, State, Zip Code)	Telephone	Number (Including Area Code)
(if different from Executive Offices)				
Brief Description of Business		— 		
Trust created for the purpose of issuing ce	ertificates secured by bonds and/	or other securities		
Type of Business Organization				
,,	nited partnership, already formed	other (pl	ease specify):	BRACEOGE
	nited partnership, to be formed		case speemy t.	" "IUUESSED
		Trust		
Associate Performant Property Community	Month Year		1	4 OCT 0 1.2007
Actual or Estimated Date of Incorporation or Org Jurisdiction of Incorporation or Organization: (E		Actual Estim		
Jurisdiction of memporation of Organization. (t	CN for Canada; FN for other foreign		NM	> THOMSOM
	Civilor Canada, 114 for Other foreign	Juliaurenon)	רחומו	FINANCIAL
GENERAL INSTRUCTIONS				

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 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 predictated 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: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual) Bear Creek Securities, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code) The Tabor Center, 1200 17th St., Ste. 970, Denver, Colorado 80202	
Check Box(es) that Apply: Promoter Menaging Partner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual) Bear Creek Municipal Bond Partners, LLLP	
Business or Residence Address (Number and Street, City, State, Zip Code)	
The Tabor Center, 1200 17th St., Ste. 970, Denver, Colorado 80202	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual) Ergen, Charles	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Gouger Franzmann & Hooke, LLC, 400 Inverness Pkwy, Suite 250, Englewood, CO 80112	
Check Box(es) that Apply: Promoter 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: Promoter 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: Promoter 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: Promoter 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)	

	B. INFORMATION ABOUT OFFERING												
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											Yes	No ⊠
				Ans	wer also ir	Appendix	. Column 2	t, if filing (under ULC	E.			_
2.	2. What is the minimum investment that will be accepted from any individual?										\$ <u>100</u>	0,000,0	
3.	3. Does the offering permit joint ownership of a single unit?									Yes	No 		
4.	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 name first, if individual)												
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	Street, C	ty, State, Z	(ip Code)	<u>. </u>	·				
Nar	me of As	sociated B	roker or De	aler								 -	
Sta	tes in Wi	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)				,,			□ Al	l States
	AL II. MT	AK IN NE SC	AZ JA NV SD	AR KS NII TN	KY KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OII WV	GA MN OK WI	MS OR WY	MO PA PR
Full Name (Last name first, if individual)													
Bus	siness or	Residence	: Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nar	ne of As:	sociated Bi	roker or De	aler				·					
Sta	tes in Wh	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)							☐ Al	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NII TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OII WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)					•				
Bus	siness or	Residence	: Address (1	Number an	d Street, C	ity, State. Z	Zip Code)	 	-				
Nai	ne of Ass	sociated Bi	roker or De	aler								· · · · · · · · · · · · · · · · · · ·	
Stat	tes in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
(Check "All States" or check individual States)								□ Al	l States				
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NII TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OII WV	GA MN OK WI	MS OR WY	MO PA PR

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 the 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 Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify equity interest in trust	15,200,000.00	\$ 15,200,000.00
	Total		
	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 on the total lines. Enter "0" if answer is "none" or "zero."		Aggregata
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$_15,200,000.00
	Non-accredited Investors		\$
	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, 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.		
	There is OCC in the	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$ \$_0.00
	Total		\$_0.00
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 insurer. 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		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)		\$
	Total		© 0.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF I	ROCLEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$15,200,000.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$. 🗆 \$
	Purchase of real estate		<u> </u>	. 🗆 \$
	Purchase, rental or leasing and installation of mac and equipment	hinery	\$. 🗆 \$
	Construction or leasing of plant buildings and fac	ilities	\$	s
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger)	ets or securities of another	¢	Π \$
				
	Repayment of indebtedness		_	
	Working capital		•	
	Other (specify):			. 🗀 *
			\$	
	Column Totals		V] \$_0.00	7 \$ 0.00
	Total Payments Listed (column totals added)	☑ \$_0	.00	
Г		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commis	ssion, upon writte	
lss	uer (Print or Type)	Signapare	Date	
Ве	ar Creek Certificates Trust (Non-AMT) Series 200	She M O'Vil	09-08-07	
	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Sha	wn O'Neal	Manager of Trustor		

- ATTENTION -

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 pre provisions of such rule?		es No						
	See /	Appendix, Column 5, for state respon	se.						
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on For 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 th issuer to offerees.								
4.	The undersigned issuer represents that the iss limited Offering Exemption (ULOE) of the sta of this exemption has the burden of establishing	ite in which this notice is filed and un	derstands that the issuer claimir						
	er has read this notification and knows the content thorized person.	nts to be true and has duly caused this n	otice to be signed on its behalf b	y the undersigned					
lssuer (Print or Type)	Signature	Date						
Bear Cr	reek Certificates Trust (Non-AMT) Series 2007	She dy Olal	09-08-07						
Name (I	Print or Type)	Title (Print or Type)	l						
Shawn	O'Neal	Manager of Trustor							

Manager of Trustor

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 1 2 3 4 Disqualification Type of security under State ULOE and aggregate (if yes, attach Intend to sell offering price explanation of Type of investor and to non-accredited offered in state amount purchased in State waiver granted) investors in State (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes No ALΑK ΑZ AR CAEquity interest in CO 8 × \$15,200,00 trust-\$15.200.000 CT DE DC FL GAHI ID IL IN IA KS ΚY LA ME MD MA МІ MNMS

2 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach Type of investor and to non-accredited offering price explanation of offered in state amount purchased in State waiver granted) investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Yes No Investors Investors No State Amount Amount Yes МО MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SCSD TN TXUT VTVAWAWVWΙ

APPENDIX

	APPENDIX										
1	:	2	3		4						
	Intend to sell to non-accredited investors in State (Part B-Item 1) 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)				under State ULOI (if yes, attach explanation of waiver granted) (Part E-Item I)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY		·									
PR											