# FORM D OCT 1 6 2007 Name of Offering ( C) check if

UNITED STATES //664 = 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 APPROVAL					
Expir Estin	es: nated average	3235-0076 April 30, 2008 burden 16.00				
	SEC US	SE ONLY				
Prefix	(	Serial				
	ı	1				
	DATE B	ECEIVED				

	<u></u>					
Name of Offering	(☐ check if this is an a	mendment and name I	nas changed, and ir	dicate change.)		
Offering of Limited	Partnership Interests of	PilotRock Investmen	nt Partners, L.P.			
Filing Under (Check t	pox(es) that apply):	☐ Rule 504	☐ Rule 505	☑ Rule 506	Section 4(6)	☐ ULOE
Type of Filing:	■ New Filing	☑ Amendment				
		A. BASIC	DENTIFICAT	ION DATA	111111111111111111111111111111111111111	A ATT PRINT TA ATA JETEL ATTAL TIPUL ATTAL LAND
1. Enter the inform	ation requested about the	issuer	· · ·			
Name of Issuer	check if this is an an	nendment and name h	as changed, and in	dicate change.	1100/1100	110
PilotRock Investmen	nt Partners, L.P.				(	7079514
Address of Executive	Offices		(Number and Stree	t, City, State, Zip Co	de) Telephone Nu	mber (Including Area Code)
1700 East Putnam A	venue, Old Greenwich,	CT 06870			] (	(203) 698-8821
Address of Principal (	Offices		(Number and Stree	et, City, State, Zip Co	de) Telephone Nu	mber (Including Area Code)
(if different from Exec	cutive Offices)			77700		
Brief Description of B	usiness: Private In	estment Company		PHOCESSE	D	
Type of Business Org	ganization			ULI 23 2007	<b>→</b>	
	corporation	🛛 limited p	artnership, already	OPACO MINISTRA	other (please sp	ecify)
	business trust	☐ limited p	artnership, to be for	medNANCIA:		
			Month	Year		
Actual or Estimated D	Date of Incorporation or O	rganization:	1 2	0	1 🛛 Act	ual 🔲 Estimated
Jurisdiction of Incorpo	A. BASIC IDENTIFICATION DATA  ther the information requested about the issuer  of Issuer					
		CN	I for Canada: FN fo	r other foreign jurisdir	ction) D	F

# **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 predicated on the filing of a federal notice.

Persons who 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.

SEC 1972 (5-05)

. A. BASIC IDENTIFICATION DATA										
Each promoter of tr     Each beneficial own     Each executive office	- A									
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General Partner					
Full Name (Last name first,	if individual):	PilotRock Investmen	t Partners GP, LLC	·						
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 1700 East Putnam	Avenue, Old Gre	enwich, CT 06870					
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner		☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first,	if individual):	O'Malley, Jr., Thoma	as D., Sr.							
Business or Residence Address (Number and Street, City, State, Zip Code): 1700 East Putnam Avenue, Old Greenwich, CT 06870										
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner					
Full Name (Last name first,	f individual):	Hoban, Thomas L.								
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 1700 East Putnam	Avenue, Old Gre	enwich, CT 06870					
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last name first, i	f individual):	Meisrow Institutiona	l Equity Offshore Fund Ltd	l.						
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 1700 East Putnam	Avenue, Old Gre	enwich, CT 06870					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name first, i	f individual):									
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de):							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, i	f individual):									
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de):							
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, i	f individual):									
Business or Residence Add	ess (Number and	Street, City, State, Zip Coo	le):							
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last name first, i	f individual):									
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	le):							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner					

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

L.	•				В.	INFORM	MATION	ABOUT	OFFER	IING			
1.	Has the issue	er sold, or	does the is	suer inten	d to sell, to Answer	o non-accr also in Ap <sub>l</sub>	edited inve pendix, Co	estors in th lumn 2, if	is offering filing unde	? r ULOE.		☐ Yes	⊠ No
2.	What is the n	ninimum in	vestment	hat will be	accepted	from any i	ndividual?	•••••		•••••			000,000**
												**may be	e waived
	Does the offe	•	-	•	•							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 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 I	Name (Last n	ame first, i	f individual	)									
Busi	ness or Resid	ence Addr	ess (Numb	per and Str	eet, City, \$	State, Zip	Code)						
Nam	e of Associate	ed Broker	or Dealer	:									
	s in Which P												
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 _[		 □ [IA]											
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Full	Name (Last na	ame first, it	f individual	)									
Busin	ness or Resid	ence Addr	ess (Numb	per and Str	eet, City, S	State, Zip	Code)	****				· ,	
Nam	e of Associate	ed Broker o	or Dealer										
	s in Which Po (Check "All S												☐ All States
□ [A	L) 🔲 [AK]	☐ [AZ]	[AR]	CA]	[CO]		□ [DE]		☐ [FL]	□ [GA]	☐ [HI]	□ [1D]	
□ [II	[NI] 🔲 [.	□ (IA)	□ [KS]	☐ [KY]		[ME]		☐ [MA]	[IM]	☐ [MN]	☐ [MS]	[MO]	
☐ {N	. —	_	□ [NH]								[OR]		
☐ [F	(SC)		[NT]	[XT]	[(UT)		□ [VA]	[AW]	[WV]			[PR]	
Full N	lame (Last na	ame first, if	individual	)									
Busir	ess or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (	Code)						
Name	of Associate	ed Broker o	or Dealer										
	s in Which Po (Check "All S					olicit Purch	nasers						☐ Ali States
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[ונ	.] 🔲 [IN]	□ [IA]	□ [KS]	□ [KY]	[LA]	☐ [ME]	☐ [MD]	☐ [MA]	[Mi]	☐ [MN]	☐ [MS]	☐ [MO]	
<b>□</b> [M	IT) 🔲 [NE]	□ [NV]	□ [NH]	□ [NJ]	[MM]	□ [NY]	□ [NC]	□ [ND]	□ [OH]	□ [OK]	□ [OR]	□ [PA]	
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

3 of 8

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 Offering Price		Amount Already Sold
	Debt			\$	20.0
	Equity			- <u>-</u>	
	□ Common □ Preferred	· <u> </u>		<u> </u>	
	Convertible Securities (including warrants)	s		\$	
	Partnership Interests			- <del>-</del> -	148,661,132
	Other (Specify)		000,000,000	- <del>-</del> s	·
	Total		500 000 000	- <del>\$</del> -	140 661 122
	Answer also in Appendix, Column 3, if filing under ULOE	<u> </u>	500,000,000	<u> </u>	148,661,132
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		38	s	148,661,132
	Non-accredited Investors			- <u>*</u> \$	0
	Total (for filings under Rule 504 only)			. <u>*</u>	0
	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		Types of Security		Dollar Amount Sold
	Rule 505		N/A	<u> </u>	N/A
	Regulation A		, N/A	<u>\$</u>	N/A
	Rule 504		N/A	\$	N/A
	Total		N/A	<u>\$</u>	N/A
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		🗆	\$	O
	Printing and Engraving Costs		🗆	\$	0_
	Legal Fees		🛛	<u>\$</u>	47,176
	Accounting Fees		🗆	\$	o
	Engineering Fees		🗆	\$	0
	Sales Commissions (specify finders' fees separately)		🗆	\$	0
	Other Expenses (identify)		🗆	\$	0
	Total			\$	47,176

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

	O. OTTERMOTIMOE, NUMBER	ER OF INTEGRATION, EXC.				
4	Question 1 and total expenses furnished in response to	Part C–Question 4.a. This differe	nce is the		<u>\$</u>	499,952,824
5	used for each of the purposes shown. If the amount for estimate and check the box to the left of the estimate. T	any purpose is not known, furnish he total of the payments listed mu	an Ist equal	Payments to		. •
		Payments to Officers, Directors & Affiliates  Salaries and fees		Payments to Others		
	Salaries and fees			<u>\$</u>		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installation of ma	chinery and equipment		\$	🗆	<u>\$</u>
	Construction or leasing of plant buildings and fac	ilities		\$	□	\$
	offering that may be used in exchange for the ass	sets or securities of another issue		_	-	
	·		_	\$		\$
	•			\$		<u>\$</u>
	• •			\$		
	Other (specify): <u>Limited Partnership Interests</u>	<del></del>		\$		\$499,952,824
				\$		\$
				\$		\$499,952,824
	Total payments Listed (column totals added)			$\boxtimes$	\$499,95	2,824
		D. FEDERAL SIGNATU	RE			
co	nstitutes an undertaking by the issuer to furnish to the U.S	<ol><li>Securities and Exchange Comn</li></ol>	on. If this r nission, up	otice is filed under on written request o	Rule 505, the f its staff, the	following signature information furnished
	• • • • • • • • • • • • • • • • • • • •	Signature DM			Date	ober 16 2007
		Title of Signer (Print or Type)			1 000	
		Chief Compliance Officer of I	PilotRock	Investment Partne	rs GP, LLC,	the General Partner
		of House of History Court of the	<del></del> , L.	r		
Question 1 and total experadjusted gross proceeds Indicate below the amour used for each of the purp estimate and check the bithe adjusted gross process  Salaries and fees Purchase of real of Purchase, rental of Construction or leteral experiment to a mer Repayment of ind Working capital  Other (specify): Little Column Totals Total payments Little Constitutes an undertaking by the issuer to any non-accordiscuer (Print or Type) PilotRock Investment Partre Name of Signer (Print or Type) Thomas L. Hoban		•				
				,		
						•
	•	•				
Question 1 and total expenses furnished in response to Part C~Question 4.a. This difference is the adjusted gross proceeds to the issuer.*  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  Purchase of real estate.  Purchase of real estate.  Purchase, rental or leasing and installation of machinery and equipment.  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.  Repayment of indebtedness.  Working capital.  Other (specify): Limited Partnership Interests  D. FEDERAL SIGNATURE  This issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the informatio by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.  Name of Signer (Print or Type)  Filte of Signer (Print or Type)  Title of Signer (Print or Type)  Title of Signer (Print or Type)  Filte of Signer (Print or Type)						
_	Intentional misstatements or omiss		riminal vi	olations. (See 18 I	J.S.C. 1001 )	<u> </u>
Т		<u>.                                    </u>				
1		L, JIMIE SIGNATU	· \ L			

_,	(17 CFR 239.500) at such times as require	ed by state law.	
3.	The undersigned issuer hereby undertake	s to furnish to the state administrators, upon written reques	$\mathbf{t}_{i}$ information furnished by the issuer to offerees.
4.		e issuer is familiar with the conditions that must be satisfied his notice is filed and understands that the issuer claiming the been satisfied.	
	suer has read this notification and knows the rized person.	contents to be true and has duly caused this notice to be si	gned on its behalf by the undersigned duly
	(Print or Type)  Rock Investment Partners, L.P.	Signature Oldfale	Date October 16,2007
Name	of Signer (Print or Type) as L. Hoban	Title of Signer (Print or Type) Chief Compliance Officer of PilotRock Invest PilotRock Investment Partners, L.P.	ment Partners GP, LLC, the General Partner of

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

See Appendix, Column 5, for state response.

# Instruction:

1.

2.

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.

-				AP	PENDIX					
			2					T		
1	Intend to non-a investors	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)	Type of investor and amount purchased in State					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)	
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ		Х	\$500,000,000	6	\$12,847,616	0	\$0		Х	
AR										
CA		Х	\$500,000,000	3	\$6,800,000	0	\$0		х	
СО										
СТ		Х	\$500,000,000	9	\$50,591,481	0	\$0		х	
DE										
DC							· · · · · · · · · · · · · · · · · · ·			
FL		х	\$500,000,000	1	\$1,500,000	0	\$0		×	
GA		Х	\$500,000,000	1	\$1,250,000	0	\$0		х	
НІ										
ID										
IL.		х	\$500,000,000	2	\$35,000,000	0	\$0		х	
IN										
IA										
KS			_							
KY								ļ		
LA					- <u></u>					
ME		Х	\$500,000,000	2	\$2,000,000	0	\$0		х	
MD										
MA						-				
МІ			,							
MN										
MS										
МО										
MT										
NE										
NV										
NH										
NJ		Х	\$500,000,000	1	\$524,887	0	\$0		Х	
NM										

	1			АР	PENDIX					
1	2	2	3		•	4		5		
	investors	ccredited	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)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NY		х	\$500,000,000	4	\$4,983,211	0	\$0		Х	
NC										
ND										
ОН	. =									
ОК										
OR		Х	\$500,000,000	2	\$1,800,000	0	\$0		X	
PA		Х	\$500,000,000	1	\$1,050,000	0	\$0		x	
RI										
sc					<b></b>		<b></b>			
SD										
TN		Х	\$500,000,000	1	\$1,000,000	0	\$0		X	
TX		х	\$500,000,000	3	\$7,500,000	0	\$0		X	
UT										
VT										
VA										
WA		Х	\$500,000,000	1	\$1,100,000	0	\$0		X	
wv										
WI										
WY								İ		
Non- US		х	\$500,000,000	1	\$14,000,000	0	\$0		x	

