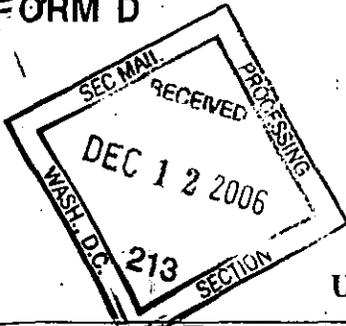


1384919

FORM D

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

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



FORM D

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



Name of Offering (check if this is an amendment and name has changed, and indicate change.)
2006 Debt and Equity Financing/Management Compensation Arrangement
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment (1) SEE FOOTNOTES ATTACHED TO PAGE 6

A. BASIC IDENTIFICATION DATA

I. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
THV Holdings LLC and Affiliates (2)
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
5611 Fern Valley Road, Louisville, Kentucky 40228 (502) 968-2020
Address of Principal Business Operations (if different from Executive Offices) (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
Brief Description of Business
Home Improvement stores.

PROCESSED

Type of Business Organization
 corporation limited partnership, already formed other (please specify): limited liability company
 business trust limited partnership, to be formed
Actual or Estimated Date of Incorporation or Organization: Month 10 Year 06 Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: DE
CN for Canada; FN for other foreign jurisdiction)

JAN 03 2007
THOMSON
FINANCIAL

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.

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)
MMP Capital Partners (A), L.P. (3)

Business or Residence Address (Number and Street, City, State, Zip Code)
1775 Eye Street NW, Suite 800, Washington, DC 20006

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
MMP Capital Partners (QP), L.P. (3)

Business or Residence Address (Number and Street, City, State, Zip Code)
1775 Eye Street NW, Suite 800, Washington, DC 20006

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Smith, Charles L. (4) (5) (6)

Business or Residence Address (Number and Street, City, State, Zip Code)
5611 Fern Valley Road, Louisville, Kentucky 40228

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Jenkins, George (4)

Business or Residence Address (Number and Street, City, State, Zip Code)
5611 Fern Valley Road, Louisville, Kentucky 40228

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Anderson, David (4) (5)

Business or Residence Address (Number and Street, City, State, Zip Code)
5611 Fern Valley Road, Louisville, Kentucky 40228

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Cox, Robert (4)

Business or Residence Address (Number and Street, City, State, Zip Code)
5611 Fern Valley Road, Louisville, Kentucky 40228

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Townzen, Stephen (4)

Business or Residence Address (Number and Street, City, State, Zip Code)
5611 Fern Valley Road, Louisville, Kentucky 40228

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

**THV HOLDINGS LLC
FORM D
A. BASIC IDENTIFICATION DATA CONTINUED**

Check Box(es) that Apply:	<input type="checkbox"/> Promoter	<input type="checkbox"/> Beneficial Owner	<input type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> General and/or Managing Partner
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Full Name (Last name first, if individual)

Watson, Christopher (4)

Business or Residence Address (Number and Street, City, State, Zip Code)

5611 Fern Valley Road, Louisville, Kentucky 40228

Check Box(es) that Apply:	<input type="checkbox"/> Promoter	<input type="checkbox"/> Beneficial Owner	<input type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> General and/or Managing Partner
---------------------------	-----------------------------------	-------------------------------------------	--------------------------------------------	----------------------------------------------	----------------------------------------------------------

Full Name (Last name first, if individual)

Gunty, Murry N. (6)

Business or Residence Address (Number and Street, City, State, Zip Code)
and Street, City, State, Zip Code)

1775 Eye Street NW, Suite 800, Washington, DC 20006

Check Box(es) that Apply:	<input type="checkbox"/> Promoter	<input type="checkbox"/> Beneficial Owner	<input type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> General and/or Managing Partner
---------------------------	-----------------------------------	-------------------------------------------	--------------------------------------------	----------------------------------------------	----------------------------------------------------------

Full Name (Last name first, if individual)

Pincus, Robert P. (6)

Business or Residence Address (Number and Street, City, State, Zip Code)

1775 Eye Street NW, Suite 800, Washington, DC 20006

Check Box(es) that Apply:	<input type="checkbox"/> Promoter	<input type="checkbox"/> Beneficial Owner	<input type="checkbox"/> Executive Officer	<input checked="" type="checkbox"/> Director	<input type="checkbox"/> General and/or Managing Partner
---------------------------	-----------------------------------	-------------------------------------------	--------------------------------------------	----------------------------------------------	----------------------------------------------------------

Full Name (Last name first, if individual)

Miller, Richard (6)

Business or Residence Address (Number and Street, City, State, Zip Code)
and Street, City, State, Zip Code)

1775 Eye Street NW, Suite 800, Washington, DC 20006

B INFORMATION ABOUT OFFERING

Yes No

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? 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? \$ 12,000.00

Yes No

3. Does the offering permit joint ownership of a single unit? 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 Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "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 name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "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 name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "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

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

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	\$ (7)	\$ (7)
Equity <u>Common Shares (LIC Interests) in Holdings</u>	\$	\$
	<input checked="" type="checkbox"/> Common <input type="checkbox"/> Preferred	
Convertible Securities (including warrants)	\$ (7)	\$ (7)
Partnership Interests	\$	\$
Other (Specify <u>Profits Shares (LIC interests) in Holdings</u>)	\$ (8)	\$ (8)
Total	\$ <u>13,753,000</u>	\$ <u>13,753,000</u>

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."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	<u>7</u>	\$ <u>13,753,000</u>
Non-accredited Investors	<u>0</u>	\$ <u>0.00</u>
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.

Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$ <u>0.00</u>

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	<input type="checkbox"/>	\$
Printing and Engraving Costs	<input type="checkbox"/>	\$
Legal Fees	<input checked="" type="checkbox"/>	\$ <u>200,000</u>
Accounting Fees	<input checked="" type="checkbox"/>	\$ <u>25,000</u>
Engineering Fees	<input type="checkbox"/>	\$
Sales Commissions (specify finders' fees separately) <u>Finder's Fee (9)</u>	<input checked="" type="checkbox"/>	\$ <u>400,000</u>
Other Expenses (identify)	<input type="checkbox"/>	\$
Total	<input checked="" type="checkbox"/>	\$ <u>625,000</u>

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.”

\$ 13,118,000

5. Indicate below the amount of the adjusted gross proceed 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.

	(10)	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees		<input checked="" type="checkbox"/> \$ 187,500	<input checked="" type="checkbox"/> \$ 187,500
Purchase of real estate		<input type="checkbox"/> \$	<input type="checkbox"/> \$
Purchase, rental or leasing and installation of machinery and equipment		<input type="checkbox"/> \$	<input type="checkbox"/> \$
Construction or leasing of plant buildings and facilities		<input type="checkbox"/> \$	<input type="checkbox"/> \$
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)		<input type="checkbox"/> \$	<input type="checkbox"/> \$
Repayment of indebtedness	(11)	<input checked="" type="checkbox"/> \$ 4,400,000	<input type="checkbox"/> \$
Working capital			<input checked="" type="checkbox"/> \$ 1,603,508
Other (specify): <u>Repurchase of outstanding equity securities of</u> <u>Affiliates</u>		<input checked="" type="checkbox"/> \$ 6,926,792	<input type="checkbox"/> \$
.....		<input type="checkbox"/> \$	<input type="checkbox"/> \$
Column Totals		<input checked="" type="checkbox"/> \$ 11,326,729	<input checked="" type="checkbox"/> \$ 1,801,208
Total Payments Listed (column totals added)		<input checked="" type="checkbox"/> \$ 13,118,000	

DIGITAL SIGNATURE

The 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 signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) THV Holdings LLC and Affiliates	Signature <i>Charles L. Smith</i>	Date 12/11/2006
Name of Signer (Print or Type) Charles L. Smith	Title of Signer (Print or Type) Manager of Holdings and CEO of each of the Affiliates	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

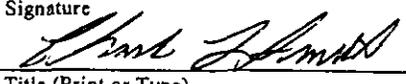
STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? Yes 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.

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) THV Holdings LLC and Affiliates	Signature 	Date 12/11/2006
Name (Print or Type) Charles L. Smith	Title (Print or Type) Manager of Holdings and CEO of each of the Affiliates	

Instruction:

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.

ATTACHMENT TO PAGE 6

FOOTNOTES

1. This filing amends and supplements the filing made as of October 23, 2006 as to the transactions described herein.
2. THV Holdings LLC ("Holdings") and True Home Value, Inc., Leingang Home Center, Inc., and Thermal Line Windows, Inc. (collectively, the "Affiliates") are the issuers of the securities. In connection with the transactions contemplated herein, Holdings purchased all of the outstanding capital stock and the outstanding debt of the Affiliates using the proceeds of the issuance of equity and the debt securities (the "Closing"). On or before December 31, 2006, the Affiliates will contribute their assets to Holdings in exchange for "Preferred Shares" (nonvoting LLC interests with liquidation preferences in Holdings).
3. As of the Closing, MMP Capital Partners (AI), L.P. and MMP Capital Partners (QO), L.P. (the "MMP Entities") beneficially owned, in the aggregate, approximately 75% of each of the Affiliates. Holdings used the proceeds of the issuance of equity and debt securities to purchase all of the outstanding equity and debt securities in the Affiliates held by the MMP Entities. There were no other 10% beneficial owners of the Affiliates as of the Closing.
4. Executive Officers of the Holdings and each of the Affiliates.
5. Co-Manager and member of Holdings.
6. Director of each of the Affiliates, as of the Closing. Gunty, Miller and Pincus resigned their positions with each of the Affiliates immediately after the Closing.
7. In connection with the issuance of debt securities in the face amount of \$12,500,000, the creditor/purchaser will receive approximately 27% of the "Common Shares" of Holdings, which are similar to common stock. The other purchasers, who are executive officers of the Holdings will contribute shares of the Affiliates, as well as cash and notes in total amount of \$1,253,000, for the remaining 73% of the "Common Shares" of Holdings.
8. Holdings will issue "Profits Shares," LLC interests representing the increase in the value of Holdings after the Closing, to four of the executive officers of Holdings who also purchased Common Shares in this transaction. The issuance of these "Profits Shares" constitutes the management compensation component of this transaction.
9. The finder's fee was incurred only with respect to the creditor-purchaser located in California.
10. The creditor-purchaser charged a funding fee of \$187,500 in connection with this transaction.
11. A portion of the proceeds of this transaction was used to repay the outstanding indebtedness of the Affiliates.

APPENDIX

1 State	2 Intend to sell to non-accredited investors in State (Part B-Item 1)		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)	
	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		x	(7)	2	\$12,500,000	0	\$0.00		x
CO									
CT									
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN									
IA									
KS									
KY		x	(7), (8)	1	\$41,000.00	0	\$0.00		x
LA									
ME									
MD									
MA									
MI									
MN									
MS									

APPENDIX

1	2		3	4				5	
	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)				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
MO		x	(7), (10)	2	\$200,000.00	0	\$0.00		x
MT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND		x	(7), (10)	1	\$12,000.00	0	\$0.00		x
OH									
OK									
OR									
PA									
RI									
SC									
SD									
TN									
TX		x	(7)	1	\$1,000,000.	0	\$0.00		x
UT									
VT									
VA									
WA									
WV									
WI									

APPENDIX

1	2		3	4				5	
	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)				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
WY	<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>
PR	<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>