

OMB APPROVAL	
OMB Number:	3235-0076
Expires:	June 30, 2008
Estimated average burden hours per response:	16.00

SEG
Mail Processing
Section

JUN 27 2008

Washington, DC
101

FORM D

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

SEC USE ONLY		
Prefix		Serial
DATE RECEIVED		

Name of Offering: (check if this is an amendment and name has changed, and indicate change.)
6.00% Senior Notes due June 15, 2033

Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of the Issuer (check if this is an amendment and name has changed, and indicate change.)
Port Washington Generating Station, LLC

Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
301 W. Wisconsin Avenue, Suite 600, Milwaukee, Wisconsin 53203 (414) 274-4400

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
(if different from Executive Offices) **N/A**

Brief Description of Business
Port Washington Generating Station, LLC (the "Company") is an indirect wholly-owned subsidiary of Wisconsin Energy Corporation, the parent company of Wisconsin Electric Power Company ("WEPCO"). The Company was formed to construct and lease to WEPCO two 545 megawatt net nominal combustion turbine combined cycle generating units and related facilities.

Type of Business Organization
 corporation limited partnership, already formed other (please specify): limited liability company, already formed
 business trust limited partnership, to be formed

Actual or Estimated Date of Incorporation or Organization: Month Year Actual Estimated
12 2002
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: WI
CN for Canada; FN for other foreign jurisdiction)

PROCESSED
JUL 01 2008
THOMSON REUTERS

GENERAL INSTRUCTIONS

Federal
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D, Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 772(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in reliance on the exemption with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC or the date it was mailed by United States registered or qualified issuer. **[REDACTED]** received at that

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 by the issuer. **08054097** manually signed

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 sale 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)
W.E. Power, LLC

Business or Residence Address (Number and Street, City, State, Zip Code)
301 W. Wisconsin Avenue, Suite 600, Milwaukee, Wisconsin 53203

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

Full Name (Last name first, if individual)
Mark E. Stone

Business or Residence Address (Number and Street, City, State, Zip Code)
301 W. Wisconsin Avenue, Suite 600, Milwaukee, Wisconsin 53203

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)

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)

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

B. INFORMATION ABOUT OFFERING

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?..... **\$500,000**
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) person 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)
Citigroup Global Markets Inc.

Business or Residence Address (Number and Street, City, State, Zip Code)
390 Greenwich Street, 4th Floor, New York, New York 10013

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]X	[AK]	[AZ]	[AR]	[CA]X	[CO]X	[CT]X	[DE]	[DC]	[FL]	[GA]X	[HI]	[ID]
[IL]X	[IN]X	[IA]X	[KS]	[KY]X	[LA]	[ME]	[MD]	[MA]X	[MI]	[MN]X	[MS]X	[MO]
[MT]	[NE]X	[NV]	[NH]	[NJ]X	[NM]	[NY]X	[NC]X	[ND]	[OH]X	[OK]	[OR]X	[PA]X
[RI]	[SC]	[SD]	[TN]X	[TX]X	[UT]X	[VT]X	[VA]	[WA]	[WV]	[WI]X	[WY]	[PR]

Full Name (last name first, if individual)
J.P. Morgan Securities Inc.

Business or Residence Address (Number and Street, City, State, Zip Code)
131 South Dearborn, Chicago, Illinois 60670-0701

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]X	[AK]	[AZ]	[AR]	[CA]X	[CO]X	[CT]X	[DE]	[DC]	[FL]	[GA]X	[HI]	[ID]
[IL]X	[IN]X	[IA]X	[KS]	[KY]X	[LA]	[ME]	[MD]	[MA]X	[MI]	[MN]X	[MS]X	[MO]
[MT]	[NE]X	[NV]	[NH]	[NJ]X	[NM]	[NY]X	[NC]X	[ND]	[OH]X	[OK]	[OR]X	[PA]X
[RI]	[SC]	[SD]	[TN]X	[TX]X	[UT]X	[VT]X	[VA]	[WA]	[WV]	[WI]X	[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]	[OK]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WI]	[]	[WY]	[PR]

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

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

1. Enter the aggregate offering price of securities 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 amount of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ <u>156,000,000</u>	\$ <u>156,000,000</u>
Equity.....	\$ _____	\$ _____
<input type="checkbox"/> Common <input type="checkbox"/> Preferred	\$ _____	\$ _____
Convertible Securities (including warrants).....	\$ _____	\$ _____
Partnership Interests.....	\$ _____	\$ _____
Other (Specify _____)	\$ _____	\$ _____
Total	\$ <u>156,000,000</u>	\$ <u>156,000,000</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 amounts 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>27</u>	\$ <u>156,000,000</u>
Non-accredited Investors	<u>0</u>	\$ _____
Total	<u>27</u>	\$ <u>156,000,000</u>

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	_____	\$ _____

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	<input checked="" type="checkbox"/>	\$ <u>10,000</u>
Printing and Engraving Costs	<input type="checkbox"/>	\$ _____
Legal Fees.....	<input checked="" type="checkbox"/>	\$ <u>925,000</u>
Accounting Fees	<input type="checkbox"/>	\$ _____
Engineering Fees.....	<input type="checkbox"/>	\$ _____
Sales Commissions (specify finders' fees separately) (Placement Agent and Financial Advisors).....	<input checked="" type="checkbox"/>	\$ <u>1,092,000</u>
Other Expenses (identify) (Intralinks, Travel and Miscellaneous Expenses).....	<input checked="" type="checkbox"/>	\$ <u>40,000</u>
Total	<input checked="" type="checkbox"/>	\$ <u>2,067,000</u>

C. OFFERING PRICE, NUMBER OF INVENTORS, EXPENSES AND USE 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."

\$ 153,933,000

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 Other
Salaries and fees.....	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	\$ _____
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 building and facilities	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	\$ _____
Acquisition of other business (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 (intercompany indebtedness).....	<input checked="" type="checkbox"/>	\$ <u>100,000,000</u>	<input type="checkbox"/>	\$ _____
Working capital.....	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	\$ _____
Other (specify): <u>General corporate purposes, including distributions to sole member</u>	<input checked="" type="checkbox"/>	\$ <u>53,933,000</u>	<input type="checkbox"/>	\$ _____
.....	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	\$ _____
Column Totals.....	<input checked="" type="checkbox"/>	\$ <u>153,933,000</u>	<input type="checkbox"/>	\$ _____
Total Payments Listed (column totals added)			<input checked="" type="checkbox"/>	\$ <u>153,933,000</u>

D. FEDERAL 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) Port Washington Generating Station, LLC	Signature 	Date June 26, 2008
Name of Signer (Print or Type) Mark E. Stone	Title of Signer (Print or Type) Vice President and General Manager	

ATTENTION

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

END