FORM D

RECD S.E.C.

UNITED STATES

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 API | PROVAL |
|-------------------|--------------|
| OMB NUMBER: | 3235-0076 |
| Expires: | May 31, 2005 |
| Estimated average | burden |

hours per response......16.00

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| Prefix | | | | Serial |
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| | s is an amendment and name has changed, and inc L.P. offering of Limited Partnership Interests | dicate change |) | | |
|---|--|---------------|---------------------------------|-----------------------------|----------------------------|
| Filing Under (Check box(es) that app | | 506 🗆 S | Section 4(6) |] ULOE | |
| Type of Filing: ☐ New Filing | | | | | |
| | A. BASIC IDENTIFICATION D | DATA | | | |
| 1. Enter the information requested ab | | | | | |
| Name of Issuer (☐ Check if this is North Bridge Venture Partners V-A, I | an amendment and name has changed, and indica L.P. | ate change.) | | | |
| Address of Executive Offices 950 Winter Street, Suite 4600, Walth | (Number and Street, City, State, aam, MA 02451 | Zip Code) | Telephone Nun (781) 290-0004 | mber (Including Area (4 | Code) |
| Address of Principal Business Operat (if different from Executive Offices) | ions (Number and Street, City, State, | Zip Code) | Telephone Nun | mber (Including Area (| Code) |
| Brief Description of Business A venture capital fund formed to mak | e investments in equity securities of early-stage of | ompanies. | _ | 0205978 | |
| Type of Business Organization | | | | 02055/6 | ' ' ' ' ' ' ' ' ' ' |
| ☐ corporation | limited partnership, already formed | | ther (please speci | ify): | |
| ☐ business trust | ☐ limited partnership, to be formed | | | | |
| Actual or Estimated Date of Incorpora Jurisdiction of Incorporation or Organ | ation or Organization: hization: (Enter two-letter U.S. Postal Service abb CN for Canada; FN for other foreign jun | | ☐ ☑ Actual | □ Estimated D E | PROCESSEI |
| GENERAL INSTRUCTIONS | | | | T | OCT 0 9 2002 |
| Federal: | | | | <u> </u> | THOMSON |
| Who Must File: All issuers making at | n offering of securities in reliance on an exemptio | n under Regu | lation D or Section | on 4(6), 17 CFR 230.5 | |

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 state 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.

CR

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 inc | lividual) | | | | |
| North Bridge Venture Manageme | ent V, L.P. ("Genera | ıl Partner") | | | |
| Business or Residence Address | (Numbe | er and Street, City, State, 2 | Zip Code) | | · |
| 950 Winter Street, Suite 4600, W | altham, MA 02451 | | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☑ General and/or |
| Full Name (Last name first, if inc | dividual) | | | | Managing Partner |
| Anderson, Edward T. | | | | | |
| Business or Residence Address | (Numbe | r and Street, City, State, 2 | Zip Code) | | |
| 950 Winter Street, Suite 4600, V | Valtham, MA 02451 | | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☑ General and/or |
| Full Name (Last name first, if inc | lividual) | | | | Managing Partner |
| D'Amore, Richard A. | , | | | | |
| Business or Residence Address | (Numbe | r and Street, City, State, 2 | Zip Code) | | |
| 950 Winter Street, Suite 4600, V | Valtham MA 02451 | | | | |
| Check Box(es) that Apply: | □ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☑ General and/or |
| Full Name (Last name first, if inc | lividual) | | | | Managing Partner |
| | iividuai) | | | | |
| Geary, William J. Business or Residence Address | Numba | r and Street, City, State, 2 | (in Code) | | . 1.75 |
| | • | r and Succi, City, State, 2 | inp code) | | |
| 950 Winter Street, Suite 4600, W Check Box(es) that Apply: | altham, MA 02451 ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | □ Director | ☑ General and/or |
| Check Box(es) that Apply. | Fromoter | ☐ Belleficial Owner | ☐ Executive Officer | □ Director | Managing Partner |
| Full Name (Last name first, if inc | lividual) | | | | |
| McCarthy, Jeffrey P. | | | | | W. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. |
| Business or Residence Address | (Numbe | r and Street, City, State, Z | Cip Code) | | |
| 950 Winter Street, Suite 4600, W | altham, MA 02451 | - Characteristics | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | □ Director | ☑ General and/or Managing Partner |
| Full Name (Last name first, if ind | lividual) | | | | |
| Santinelli, Angelo J. | | | | | |
| Business or Residence Address | (Number | r and Street, City, State, Z | ip Code) | | |
| 950 Winter Street, Suite 4600, W | altham, MA 02451 | | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☑ General and/or Managing Partner |
| Full Name (Last name first, if ind | ividual) | | | - | Wanaging Faither |
| Goldstein, James A. | | | | | |
| Business or Residence Address | (Number | r and Street, City, State, Z | ip Code) | | |
| 950 Winter Street, Suite 4600, W | altham, MA 02451 | | | | |

| | | A. BASIC IDENTIFICA | TION DATA | | |
|---|--|---|----------------------------|------------|--------------------------------------|
| Each beneficial owner securities of the issuer; | ssuer, if the issuer he having the power to and director of corp | has been organized within to vote or dispose, or direct porate issuers and of corpo | the vote or disposition of | | , , |
| Check Box(es) that Apply: | ☐ Promoter | ■ Beneficial Owner | ☐ Executive Officer | □ Director | ☑ General and/or Managing Partner |
| Full Name (Last name first, if in- Harvard Management Private Eq | uity Corp. | | | | |
| Business or Residence Address | (Numbe | er and Street, City, State, 2 | Zip Code) | | |
| 600 Atlantic Avenue, 16th Floor, | Boston, MA 02210 |) | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☑ General and/or Managing Partner |
| Full Name (Last name first, if in | dividual) | | | | |
| Business or Residence Address | (Numbe | er and Street, City, State, Z | Zip Code) | | |

| | | | | B. INF | ORMATIC | ON ABOU | T OFFERI | ING | | | | |
|--|--|--|---|---|---|--|--|--|--|---|--------------------------------------|--------------------|
| 1. Has the is | suer sold o | or does the i | ssuer inten | d to sell to | non accred | ited investo | ers in this o | ffering? | | | Yes | No ⊠ |
| 1. Has the is | suci solu, c | n does the i | | | | | | - | | ••••• | | Δ. |
| | | | | | Appendix, | | _ | | | | | |
| 2. What is the minimum investment that will be accepted from any individual? | | | | | | | | | \$* | | | |
| 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 commit | | | | | | | | | _ | | | |
| 4. Enter the remuneration agent of a bropersons to be Full Name (I | for solicitate oker or deal listed are a | ation of pur- ler registere associated p | chasers in o d with the s ersons of s | connection SEC and/or uch a broke | with sales o with a state or or dealer, | f securities or states, l you may se | in the offer list the name t forth the | ring. If a pe e of the bro information | rson to be l ker or deale for that bro | isted is an r. If more ker or dea | associate than five aler only. | d person or (5) |
| 1 411 1 41110 (2 | ast name 1 | iist, ii iiidiv | | | ion of the G | | | | um mvesim | one or up. | o minion, | Subject |
| N/A | | | | | | | | | | | | |
| Business or I | Residence A | Address (Nu | mber and S | Street, City, | State, Zip (| Code) | 0 | | | | | |
| | | | | | | | | | | | | |
| Name of Ass | ociated Bro | ker or Deal | er | | | | | | | | | |
| | | | | | | | | | | | | |
| States in Wh | | | | | | | | | | | | All States |
| [AL] | [AK] | AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | All States [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 (L | ast name fi | rst, if indiv | idual) | | | | | | | | | |
| | | | | | | | | | | | | |
| Business or F | Residence A | ddress (Nu | mber and S | treet, City, | State, Zip (| Code) | | | | | | |
| | | | | | | | | | | | | |
| Name of Asse | ociated Bro | ker or Deal | er | | | | | | | | | - |
| | | | | | | | | | | | | |
| States in Whi | | | | | | | | | | | | 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 (L | ast name fi | rst, if indivi | dual) | | | | | | | | | |
| | | | | | | | | | | | | |
| Business or R | Residence A | ddress (Nu | mber and S | treet, City, | State, Zip C | Code) | | | | | | |
| | | | | | | | | | | | | |
| Name of Asso | ociated Bro | ker or Deal | er | | | | | | | | | |
| | | | | | | | | | | | | |
| States in Whi | | | | | | | | | | | | A 11 C+c+ |
| (Check ". | All State" o | r check ind [AZ] | ividuai Stai [AR] | (CA) | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | All States [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] |

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

| 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 exchan and already exchanged. | ge | |
|--|-----------------------------|---|
| Type of Security | Aggregate Offering Price | Amount Already Sold |
| Debt | \$ | \$ |
| Equity | | |
| □ Common □ Preferred | <u>-</u> | |
| | | Φ. |
| Convertible Securities (including warrants) | | |
| Partnership Interests | - | |
| Other (Specify) | _ | |
| Total | \$ <u>547,709,000</u> | \$547,709,000 |
| 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 purchased non the total lines. Enter "0" if answer is "none" or "zero." | | Aggregate Dollar Amoun of Purchases |
| Accredited Investors | 122 | \$547,709,000 |
| Non-accredited Investors | 0 | \$0 |
| Total (for filings under Rule 504 only) | | \$ |
| Answer also in Appendix, Column 3, 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. | es | |
| Type of offering | Type of | Dollar Amoun |
| Rule 505 | Security | Sold \$ |
| Regulation A | | \$ |
| Rule 504 | <u> </u> | \$ |
| 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 expenditur 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 | | \$ <u>76,000</u> |
| Accounting Fees | | \$ |
| Engineering Fees | | \$ |
| Sales Commissions (specify finders' fees separately) | | \$ |
| Other Expenses (identify) Blue Sky and Administrative Fees | | \$4,000 |
| Total | | \$80,000 |

| 1 and total expenses furnished in respon | ate offering price given in response to Part C - Question se to Part C - Question 4.a. This difference is the | | | | \$ <u>547,62</u> 9, | ,000 |
|---|---|-------------|--|---------------|--|------|
| used for each of the purposes shown. If the estimate and check the box to the left of the | gross proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal t forth in response to Part C - Question 4.b above. | | | | | |
| , , , | , | | Payments to Officers, Directors, & Affiliates | | Payments To Others | |
| Salaries and fees | | \boxtimes | \$* | Ճ | \$* | |
| Purchase of real estate | | | \$ | | \$ | |
| Purchase, rental or leasing and installa- | ion of machinery and equipment | | \$ | | \$ | |
| Construction or leasing of plant building | gs and facilities | | \$ | | \$ | |
| offering that may be used in exchange | ing the value of securities involved in this for the assets or securities of another | п | S | п | \$ | |
| | | | \$ | | | |
| • • | | | \$ | | | |
| Other (specify):Investments in early | y-stage companies in large, emerging markets, focusing | | \$* | | | |
| on the East and to trade on this stren | gth nationwide. | | | | | |
| | | | \$ | | \$ | |
| | | ⊠ | \$* | ⊠ | \$* | |
| Total Payments Listed (Column totals a | ıdded) | | ⊠ \$_ | | | |
| *Unknown | | | | | | |
| | D. FEDERAL SIGNATURE | | | | ······································ | |
| following signature constitutes an undertak | gned by the undersigned duly authorized person. If this noti ing by the issuer to furnish to the U.S. Securities and Excha issuer to any non-accredited investor pursuant to paragraph | nge (| Commission, up | on v | | |
| ssuer (Print or Type) | Signature | 1 | Date | | | - |
| North Bridge Venture Partners V-A, L.P. | Gewand - Culin | _ | October 3, 20 | 02 | | |
| lame of Signer (Print or Type) | Title of Signer (Print or Type) | • | | | | - |
| Edward T. Anderson | General Partner of North Bridge Venture Management V | , L.P | ., General Partn | i er o | f the Issuer | |

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

— ATTENTION –

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