RICO S.T.C.

APR 1 7 2003

SEC 1972 (6-

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid

02)OMB control number.

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 state exemption unless such exemption is predicated on the filing of a federal notice.

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

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005

Estimated average burden PROCESS Thours per response... 1

FORM D

UNIFORM LIMITED OFFERING EXEMPTION

APR 22 2003

THOMSON FINANCIAL NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

SEC USE ONLY						
Prefix		Serial				
DAT	E RECEI	VED				

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)

Series A Convertible Participating Preferred Stock and warrants for Series A-1 Convertible **Participating Preferred Stock**

Filing Under (Check box(es) that apply):

[] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE

Type of Filing: [X] New Filing [] Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.)

Broadmargin, Inc.

Address of Executive Offices (Number and Street, City, State, Zip Code), Telephone Number (Including Area Code) 8500 Executive Park Avenue, Suite 110, Fairfax, Virginia 22031 (703) 560-1800 Address of Principal Business Operations (Number and Street, City, State, Zip Code), Telephone Number (Including Area Code) (if different from Executive Offices) **Brief Description of Business** Telecommunications cost containment Type of Business Organization [X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed Month Year 1999 Actual or Estimated Date of Incorporation or Organization: 12 [x] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

GENERAL INSTRUCTIONS

CN for Canada; FN for other foreign jurisdiction)

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 seg. or 15 U.S.C. 77d(6).

DE

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 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 in the notice constitutes a part of this notice and must be completed.

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 [x] Beneficial Owner	[x] Executive Officer	[x] Director [General and/or Managing Partner
Full Name (Last name	e first, if individual)			
Lynch, Donald T.				
Business or Residence	ce Address (Number and Street	, City, State, Zip Cod	de)	
8500 Executive Park	Avenue, Suite 110, Fairfax, V	/irginia 22031		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[x] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	e first, if individual)			
Pomilla, Anthony				
Business or Residence	ce Address (Number and Street	, City, State, Zip Coo	ie)	
8500 Executive Park	Avenue, Suite 110, Fairfax, V	/irginia 22031		
Check Box(es) that Apply:	[] Promoter [x] Beneficial Owner	[x] Executive Officer	[] Director []	General and/or Managing Partner

Full Name (Last nam	e first, if individual)			
Burd, Russell P.				
Business or Residence Address (Number and Street, City, State, Zip Code) 8500 Executive Park Avenue, Suite 110, Fairfax, Virginia 22031 Check Box(es) that [] Promoter [x] Beneficial [] Executive [] Director [] General and/Apply: Owner Officer Managing Partner				
8500 Executive Parl	k Avenue, Suite 110, Fairfax, V	/irginia 22031		
• •			[] Director [Managing
Full Name (Last nam	e first, if individual)			
Clyne, Tara H.				
Business or Residen	ce Address (Number and Street	, City, State, Zip Co	de)	
8500 Executive Parl	k Avenue, Suite 110, Fairfax, V	/irginia 22031		
Check Box(es) that Apply:	[] Promoter [x] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last nam	e first, if individual)			
Anthony Pomilla Re	evocable Trust u/a/d July 12, 2	002		
Business or Residen	ce Address (Number and Street	, City, State, Zip Co	de)	
7904 Belleflower Di	rive, Springfield, Virginia 2215	2		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[x] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last nam Morson, Roberto	e first, if individual)			
Business or Residence	ce Address (Number and Street	, City, State, Zip Co	de)	
8500 Executive Park	x Avenue, Suite 110, Fairfax, V	/irginia 22031		
Check Box(es) that Apply:	[] Promoter [x] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last nam	e first, if individual)			
Lee, Christopher C.				
Business or Residence	ce Address (Number and Street,	City, State, Zip Co	de)	

8500 Executive Par	k Avenue, Suite 110, Fairfax, \	/irginia 22031		
Check Box(es) that Apply:	[] Promoter [x] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last nam	e first, if individual)	n na a na ang ang ang ang ang ang ang an	anny amin'ny fivondronan'i Araban ao amin'ny faritr'i Araban ao amin'ny faritr'i Araban ao amin'ny faritr'i Ar	ANT THE CONTRACTOR OF THE CONT
Tettenhorst, Lester	R.			
Business or Residen	ce Address (Number and Street	, City, State, Zip Co	de)	
8500 Executive Par	k Avenue, Suite 110, Fairfax, \	/irginia 22031		
Check Box(es) that Apply:	[] Promoter [x] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last nam	e first, if individual)			
ABS Capital Partne	rs IV, L.P.			
Business or Residen	ce Address (Number and Street	, City, State, Zip Co	de)	
400 East Pratt Stree	et, Suite 910, Baltimore, Maryla	and 21202		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X].Director[] General and/o Managing Partner
Full Name (Last nam	e first, if individual)			
Emry, Frederic G., I	и			
Business or Residen	ce Address (Number and Street	, City, State, Zip Co	de)	
400 East Pratt Stree	et, Suite 910, Baltimore, Maryla	and 21202		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last nam	e first, if individual)		THE STATE OF THE S	***************************************
Nanula, Peter J.				
Business or Residen	ce Address (Number and Street	, City, State, Zip Co	de)	

Building 106, Montgomery Street (P.O. Box 29297), San Francisco, California 94129-0297

Check Box(es) that Apply:	[] Promoter [] Benefi Owner		[] Executive Officer		neral ar naging tner	nd/or
Full Name (Last nam	e first, if individual)					
Clough, Phillip A.						
Business or Residen	ce Address (Number and	Street, C	ity, State, Zip C	ode)		
c/o 8500 Executive	Park Avenue, Suite 110	, Fairfax,	Virginia 22031			
Check Box(es) that Owner Officer [] Executive [x] Director [] General Owner Officer Management						
Full Name (Last nam	e first, if individual)					
Dinsmore, Gerald K						
Business or Residen	ce Address (Number and	Street, C	ity, State, Zip C	ode)		
10285 Zipper Road,	Pilot Point, TX 76258					
	B. INFORMA	ATION AE	OUT OFFERIN	G		
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?					Yes []	No [x]
2 Mhat is the minim	Answer also in Appe		-		47 4	21.05
	um investment that will be permit joint ownership of		•			31.95 No
4. Enter the informati directly or indirectly, connection with sales or agent of a broker of the broker or dealer.	on requested for each peany commission or similals of securities in the offer or dealer registered with fer. If more than five (5) people may set forth the information	erson who ir remune ing. If a pe the SEC a ersons to l	has been or wi ration for solicita erson to be liste and/or with a sta be listed are ass	II be paid or given, ation of purchasers in d is an associated perso te or states, list the nam sociated persons of such	е	[x]
Full Name (Last nam	e first, if individual)					
McLean Securities,	LLC					
Business or Residen	ce Address (Number and	Street, C	ity, State, Zip C	ode)		
1650 Tysons Boule	vard, Suite 650, McLear	ı, Virginia	22102			
Name of Associated	Broker or Dealer:					
	on Listed Has Solicited o				States	

[AL]	[AK]	[AZ]	[AR]	[CA] X	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD] X	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[HM]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (La	ast nam	e first, if	individua	al)							-
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name	of Asso	ociated	Broker o	or Dealer								
States	s in Whi	ch Pers	on Liste	d Has So	licited or	Intends	to Solici	Purchas	ers		<u></u>	
(Che	ck "All	States"	or che	ck indivi	idual Sta	ates)	•••••	•		[] All St	ates
[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]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[VV]	[WI]	[WY]	[PR]
Full N	ame (La	ast nam	e first, if	individua	al)							<u> </u>
Busin	ess or F	Residen	ce Addr	ess (Num	ber and	Street, (City, State	e, Zip Coo	de)			
Name	of Asso	ociated	Broker o	or Dealer								
States	s in Whi	ch Pers	on Liste	d Has So	licited or	Intends	to Solicit	Purchas	ers			
(Chec	ck "All	States"	or che	ck indivi	idual Sta	ites)		•		[] All St	ates
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[IL]	[IN]	[Al]	[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]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	(Us	e blank	sheet,	or copy	and use	additio	nal copie	s of this	sheet, a	s nece	ssary.)	
****	C 05	EDING		MIIMPE	:D OE IN	VESTO	RS, EXP	ENGES A	ND HEE	OE DE	OCEED	
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							ded in this					
				sold. Ent			s "none" (

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 (1)	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity	\$18,392,363.47	\$18,392,363.47
[] Common [X] Preferred		
Convertible Securities (including warrants)	\$ 329,007.59	\$ 329,007.59
Partnership Interests	\$	\$
Other (Specify).	\$	\$

(1) The issuer may offer up to an additional aggregate of \$2,278,628.9		
Participating Preferred Stock (the "Series A Stock"), and warrants for the Serie Preferred Stock (the "Series A-1 Stock") to the same accredited investors in the who purchased such Series A Stock and warrants for Series A-1 Stock on Apri compliance with certain negotiated conditions set forth in a Stock and Warrant issuer and such accredited investors.	s A-1 Convertible Parti e States of California a I 4, 2003, subject to att	cipating nd Maryland ainment of and
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."	S	
		Aggregate
		Dollar Amount
	Number Investors	of Purchases
Accredited Investors	6	\$ 18,721,371.06
Non-accredited Investors	0	\$
Total (for filings under Rule 504 only)	6	\$ 18,721,371.06
Answer also in Appendix, Column 4, if filing under ULOE.		
offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Pa C-Question 1.		
Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$

\$18,721,371.06 \$18,721,371.06

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."

\$17,786,970.20

Payments to Officers.

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.

	Directors, & Affiliates	Payments To Others
Salaries and fees	[]\$	[] - \$
Purchase of real estate	[]\$	r i
Purchase, rental or leasing and installation of machinery and equipment	[]\$	[] - \$
Construction or leasing of plant buildings and facilities	[]\$	[] \$
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)	[X] \$11,721,371.	06[]
Repayment of indebtedness	[]\$	[] \$
Working capital	[] \$	[X] \$6,065,599.14
Other (specify):	[]\$	[] - \$
	[]\$	[] - \$
Column Totals	[]\$	[]
Total Payments Listed (column totals added)	[X]\$17	,786,970.20

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 <u>Rule 505</u>, 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)	Signature	Date
Broadmargin, Inc.	Whales !	4/14/03
Name of Signer (Print or Type)	Title (Print or Type)	
Donald T. Lynch	President	

ATTENTION

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

E. 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 [] [X]"

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)	Signature	Date
Broadmargin, Inc.	& muld // //	41 <u> 4</u> /03
Name of Signer (Print or Type)	Title (Print or Type)	
Donald T. Lynch	President	

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.

APPENDIX

1	2									
General and Cital Southern Application of the Cital Southern Application o	Intene se	H	3 Type of security		4			5 Disqualification under State ULOE		
	to no accred investo Sta (Part Item	dited ors in te : B-	and aggregate offering price offered in state (Part C-Item 1)	4	Type of investor and amount purchased in State (Part C-Item 2)				(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	
AL	103	-110		IIIV COLOTO	, (modifi	mivestors	runodni	103	110	
AK										
AZ										
AR										
CA		X	Warrants for Series A-1 Preferred Stock - \$329,007.59 Series A Preferred Stock - \$7,131.95	2	Total - \$336,139.54	0			X	
СО										
СТ										
DE			A managament and a supply a supply a supply a supply and a supply a su							
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FL										
GA										
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IL										
IN		CALLER TO SECTION								
IA										
KS						18.02.70.5				
KY										
LA										
ME										
MD		X	Series A Preferred Stock, \$18,385,231.52	4	\$18,385,231.52	0			X	
MA					иципарыными и порти					

MN	MI						
MS							
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MT							
NE							
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PA	ок						
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