FORM D

RECD S.E.C.

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

FORM D

OMB Number: Expires: May 31, 2005 Estimated average burden Hours per response.....

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					
1					

Name of Offering (check if this is an amendment and name Common Stock Private Placement	has changed, a	nd indic	ate change.)		
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rul Type of Filing: ☒ New Filing ☐ Amendment	e 505 ⊠ Ri	ıle 506	☐ Section 4(6)	⊠ ULOE	**************************************
A. BASIC IDENTIFICATION DATA					
Enter the information requested about the issuer					
Name of Issuer (check if this is an amendment and name has	changed, and	indicate	change.)		03057139
Penley, Inc.					
Address of Executive Offices (Number and Street, City, State, Zi	p Code)				per (Including Area
6470 East Johns Crossing, Suite 330				Code) (678) 475-0032	
Duluth, GA 30097					
Address of Principal Business Operations (Number and Street, C (if different from Executive Offices) same	ity, State, Zip (Code)		Telephone Numl Code) same	per (Including Area
Brief Description of Business				Code) same	
E-Commerce and Financial Services provider					
5 Commerce and I manetal out vices provider					
Type of Business Organization	 				PROCES SET
☑ corporation ☐ limited partnershi	o, already form	ed	□ othe	er (please specify):	
□ business trust □ limited partnership		. ,			MAY 01 2003
	Month Year				<u> </u>
Actual or Estimated Date of Incorporation or Organization:	0 2 14 0			☐ Estim	ated THOMSON FINANCIAL
· · · · · · · · · · · · · · · · · · ·			rice abbreviation f	or State:	
CN for Ca	nada; FN for o	her fore	eign jurisdiction)		GA
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance 77d(6).	on an exemptic	n under l	Regulation D or Sec	etion 4(6), 17 CFR 2	230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the filed Exchange Commission (SEC) on the earlier of the date it is received by due, on the date it was mailed by United States registered or certified ma	the SEC at the a	ddress gi			
Where To File: U.S. Securities and Exchange Commission, 450 Fifth St.	reet, N.W., Wash	ington, I	D.C. 20549		
Copies Required: Five (5) copies of this notice must be filed with the photocopies of the manually signed copy or bear typed or printed signature.		vhich mu	ust be manually sig	ned. Any copies no	ot manually signed must be
Information Required: A new filing must contain all information request the information requested in Part C, and any material changes from the with the SEC.					
Filing Fee: There is no federal filing fee.					
State:		AH 65	3) C 1 C 1		

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 Administration 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.

> 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 OMB control number.

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A. BASIC IDENTIFICATION DATA (continued)

- 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

Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, Lowthers, Bruce					
Business or Residence Adda 6470 East Johns		nd Street, City, State, Zi , Suite 330, Duluth, Geo			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, Shultz, Cleve B.	if individual)				
Business or Residence Addr 6470 East Johns		nd Street, City, State, Zi , Suite 330, Duluth, Geo			
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 Addr	ess (Number a	nd Street, City, State, Zip	p 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 Addr	ess (Number ar	nd Street, City, State, Zip	p 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 Addr	ess (Number ar	nd 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 Addr	ess (Number ar	nd 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)	<u></u>			
Business or Residence Addr	ess (Number ar	nd Street, City, State, Zip	Code)		
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Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?		В.	INFO	ORMA'	TION A	ABOU	r offi	ERING						
2. What is the minimum investment that will be accepted from any individual? S10,000 Yes No Yes	1. I	Has the issue	er sold or o	does the is:	suer intend	l to sell, to	non-accre	dited inve	stors in thi	s offering?	·			
A. Does the offering permit joint ownership of a single unit?					Answer	also in Ap	pendix, C	olumn 2, i	f filing und	der ULOE				
3. Does the offering permit joint ownership of a single unit?	2. V	What is the 1	minimum i	investment	that will t	oe accepte	d from any	/ individua	J?			\$	10,000	
4. Enter the information for each person who has been or will be paid or given directly, or indirectly, any commission or similar renumeration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associate 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 from than five (5) persons to be listed are associated persons of such broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) NONE 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 (Cheek "All States" or check individual States) LaL AR (AZ AR (CA (CO (CT (DE (DC (FL (GA (HI (ID (I														No
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. Is the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) NONE Business or Residence Address (Number and Street, Čity, 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). [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IIL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NF] [NN] [NI] [NN] [NN] [NN] [NN] [NN] [NV] [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). [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IIL] [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)	3.	Does the off	ering pern	nit joint o	wnership o	of a single	unit?					,	⊠	
NONE	r p ti	emuneration person or ago han five (5)	n for solici ent of a br	itation of poker or dea	urchasers aler registe	in connect cred with t	ion with sa he SEC an	ales of secu d/or with a	urities in th state or st	ne offering tates, list th	. If a persone name of	on to be lise the broke	ited is an r or deale	r. If more
Name of Associated Broker or Dealer	Full N	•		if individu	ıal)									
All States Which Person Listed Has Solicited or Intends to Solicit Purchasers	Busin	ess or Resid	lence Addi	ress (Numl	per and Str	eet, City,	State, Zip	Code)						
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(Check "All States" or check individual States) □ All States	Name	of Associat	ed Broker	or Dealer								···		
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	•				
	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND I	USE OF PRO	OCE	EDS
1.	Enter the aggregate 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 \square and indicate in the column below the amounts of securities offered for exchange and already exchanged.			A .	
	Type of Security		Aggregate offering Price	AI	nount Alread Sold
	Debt	<u>\$</u>	0	\$	0
	Equity	\$	600,000	\$	600,000
	☑ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	0	<u>\$</u>	0
	Partnership Interests.	<u>\$</u>	0	\$	0
	Other		0	\$	0
	Total	<u>\$</u>	600,000	\$	600,000
2.	Answer also in Appendix, Column 3, if filing under ULOE Enter 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 ollar Amount of Purchases
	Accredited Investors	4	16		\$600,000
	Non-accredited Investors		0		0
	Total (for filings under Rule 504 only)				
3.	Answer also in Appendix, Column 4, if filing under ULOE 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	D	ollar Amount Sold
	Rule 505	\$		\$	
	Regulation A	\$		\$	
	Rule 504	\$		\$	
	Total	\$	-	\$	-
۱.	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			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees (estimate)		⊠	\$	10,000
	Accounting Fees			\$	0
	Engineering Fees			\$	0
	Sales Commissions (Specify finder's fees separately)			\$	0

0

10,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A (continued)	ND US	E OF PR	OCEEI	OS
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 4.1. This difference is the "adjusted gross proceeds to the issuer."			\$	590,000
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 adjusted gross proceeds to the issuer set forth in Part-C-Question 4.b. above.				
	Of Dire	ments to ficers, ctors, & filiates	P	ayments to Others
Salaries and fees	\$	0	□\$	0
Purchase of real estate	\$	0	□\$	0
Purchase, rental or leasing and installation of machinery and equipment	\$	0	□\$	C
Construction or leasing of plant buildings and facilities	\$	0	□\$	C
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)	\$	0	□\$	0
Repayment of indebtedness	\$	0	□\$	0
Working capital	\$	0	⊠\$	590,000
Other (specify)	\$	0	□\$	C
Column Totals	\$	0	⊠\$	590,000
Total Payments Listed (column totals added)		⊠ \$5	90,000	·

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17.	FEDER	$\Delta \mathbf{L}$		ALLURE.

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)
Penley, Inc.

Signature
Penley, Inc.

Date

1921 19, 7203

Name of Signer (Print or Type)

Bruce F. Lowthers, Jr.

Chief Executive Officer and President

ATTENTION

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