FORM D



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

1227615

OMB APPROVAL

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

Estimated average burden

hours per response 16.00

	SEC U	SE ONLY
Prefix		Serial
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	1	

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)			7 ×
Series A Preferred Stock Offering		<i></i>	
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE			
Type of Filing: [] New Filing [X] Amendment		, ×	
A. BASIC IDENTIFICATION DATA		j	. **
Enter the information requested about the issuer	-	MA	JOI ZULE /
Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.)		· 11(-)	
SageFire, Inc.		4.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Nur	nber (Including	g Area Code) . //
4450 Arapahoe Avenue, Suite 100, Boulder, CO 80303	(303) 415-	2055	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from	Telephone Nur	mber (Including	g Area Códe)
Executive Offices)	(303) 415-	2055	
4450 Arapahoe Avenue, Suite 100, Boulder, CO 80303	(303) 113	DD (CESSED
Brief Description of Business		1 100	7 W E 8 8 E 8
		/ MAY	Y 062003
Small Business Financial Software		(tree	. ~ ~ 7003
Type of Business Organization		` !	THOMSON
[X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed			FINANCIAL
[] business treat [] initiate partitioning to be formed	Month Ye	ar	
Actual or Estimated Date of Incorporation or Organization:	[03] [0		ctual [] Estimated
Treating of Bottomice Bate of Interpolation of Organisation	[] [- 1 [].	1 1
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:			
CN for Canada; FN for other foreign jurisdiction) [DE]			

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.

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.

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 issuer.

Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner O'Brien, Jean-Paul
Full Name (Last name first, if individual) 4450 Arapahoe Road, Suite 100, Boulder, CO 80303
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Walters, Randa
Business or Residence Address (Number and Street, City, State, Zip Code) 4450 Arapahoe Road, Suite 100, Boulder, CO 80303
Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Walters, James
Business or Residence Address (Number and Street, City, State, Zip Code) 4450 Arapahoe Road, Suite 100, Boulder, CO 80303
Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [X] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Wischer, Phyllis
Business or Residence Address (Number and Street, City, State, Zip Code) 4450 Arapahoe Road, Suite 100, Boulder, CO 80303
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. INF	ORMAT	ION ABC	UT OFFI	ERING					
1. Has the is	ssuer sold	, or does the	issuer inter	nd to sell, to	non-accrec	lited investo	ors in this of	ffering?						Yes No
					Answer also	in Append	ix, Column	2, if filing t	ınder ULOE	Ē.				
2. What is t	he minim	um investm	ent that will	be accepted	d from any i	individual?.				***************	••••		\$	25,000
													_	Ves No
3. Does the	offering p	ermit joint	ownership o	of a single u	nit?	•••••••								[X] []
registered	on of purc d with the	on requested hasers in co SEC and/or dealer, you	nnection wi with a state	th sales of s e or states, l	ecurities in ist the name	the offering of the brok	g. If a perso er or dealer	on to be liste . If more the	d is an asso	ciated perso	n or agent o	of a broker o	r dealer	
Full Name (L	_ast name	first, if indi	vidual)		N/A									
Business or F	Residence	Address (N	umber and	Street, City,		Code)								
Name of Ass	ociated B	roker or Dea	aler											
States in Whi (Check "	ich Persor All States	Listed Has	Solicited on dividual St	r Intends to ates)	Solicit Purc	chasers							[] All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Name (L				(· · · · J	£ 1	11	L J	į j		t ··· · ·			[]	
Business or F	Residence	Address (N	umber and	Street, City,	State, Zip	Code)					 			
Name of Ass	sociated B	roker or Dea	aler								 ;			
States in Wh (Check ".	ich Persor All States	Listed Has	Solicited o	r Intends to	Solicit Pur	chasers							[] All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Name (1	Last name	first, if indi	vidual)											
Business or F	Residence	Address (N	umber and	Street, City,	State, Zip	Code)								•
Name of Ass	sociated B	roker or De	aler											
States in Wh (Check ".							,,						[] All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

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

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

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	Aggregate Offering Price		Amount Already Sold
	Debt S		\$	
	Equity Series A Preferred Stock\$	1,500,000	. \$ -	150,000
	Convertible Securities (including warrants)	0	. \$.	0
	Partnership Interests	0	. \$.	0
	Other (Specify)		\$	
	Total	1,500,000	\$.	150,000
	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 purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	5	_ \$	150,000
	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 CQuestion 1.	Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505		_ \$ -	
	Regulation A	-1-1-	_ \$ -	
	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	[]	s	
	Printing and Engraving Costs	[]	\$	
	Legal Fees	[X]	\$	5,000
	Accounting Fees	[]	\$	
	Engineering Fees	[]	\$	****
	Sales Commissions (Specify finders' fees separately)		\$	····
	Other Expenses (identify)	[]	\$	
	Total	[X]	s	5,000

	C. OFFERING PRICE, NUMBER O	F INVESTORS, EXPENSES AND	USE C	F PR	OCEEDS			
	b. Enter the difference between the aggregate offering price given in furnished in response to Part CQuestion 4.a. This difference is the					\$_	1,49	95,000
5.	Indicate below the amount of the adjusted gross proceeds to the issue If the amount for any purpose is not known, furnish an estimate a payments listed must equal the adjusted gross proceeds to the issuer states.	nd check the box to the left of the estir	nate. Th	e total				
	Salaries and fees		[X]	\$	Payments to Officers, Directors & Affiliates 200,000	_ []	\$	Payments to Others
	Purchase of real estate		[]	\$		_ []	\$	
	Purchase, rental or leasing and installation of machinery and equ	ipment	[]	s _		_ []	\$.	
	Construction or leasing of plant buildings and facilities		[]	\$_		_ []	\$.	
	Acquisition of other businesses (including the value of securit used in exchange for the assets or securities of another issuer pure		e []	\$_		_ []	\$.	
	Repayment of indebtedness		[]	\$		_ []	\$.	
	Working capital		[]	\$ _		_ [X]	\$.	1,295,000
	Other (specify):							
			[]	\$ _		_ []	\$.	
	Column Totals		[X]	\$ _	200,000	_ [X]	\$.	1,295,000
	Total Payments Listed (column totals added)			[X]	\$ _1,495	,000		
	D. F	EDERAL SIGNATURE						
The	issuer has duly caused this notice to be signed by the undersigned duly	authorized person. If this notice is filed	under Ru	le 505	the following	sionature	consti	itutes an
unc	ertaking by the issuer to furnish to the U.S. Securities and Exchange Co- accredited investor pursuant to paragraph (b)(2) of Rule 502.							
	er (Print or Type)	Signature		Date				
	geFire, Inc.	Jan 03_		April	<u>3</u> 6, 2003 و			
	me of Signer (Print or Type)	Title of Signer (Print or Type)	.cc					
Je	an-Paul O'Brien	President/Chief Executive O	fficer					

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?	 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) SageFire, Inc.	Signature Date April 30	, 2003
Name of Signer (Print or Type)	Title (Print or Type)	
Jean-Paul O'Brien	President/Chief Executive Officer	

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	Intenc to non-a investor	I to sell ccredited s in State -ltem I)	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)		
				Number of Accredited		Number of Non-Accredited					
State AL	Yes	No		Investors	Amount	Investors	Amount	Yes	No		
AK											
AZ											
AR											
CA								-			
CO		X	Series A Preferred Stock	4	\$125,000	0	0		X		
CT		X	Series A Preferred Stock	1	\$25,000	0	0		X		
DE		Λ	Scries A Treating Stock		323,000	· · · · · · · · · · · · · · · · · · ·	0		^		
DC				13 1 111							
FL											
GA						- 19					
HI											
ID											
IL				· · · · · · · · · · · · · · · · · · ·							
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APPENDIX

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	Intend to non-a investors	to sell	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)					
State	Yes	No		Number of Accredited Investors	Number of Number of Accredited Non-Accredited					
OR		7.0		111111111111111111111111111111111111111			7.111.00.11	Yes	No	
PA			-							
RI										
SC										
SD										
TN										
TX										
UT										
VT					<u> </u>					
VA								·		
WA										
WV										
WI										
WY										
PR										