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UNITED STATES SECURITIES EXCHANGE COMMISSION Washington D.C. 20549

FORM D NOTICE OF SA

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response....1

THOWSON FINANCIAL

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NOTICE OF CALE OF CECHDITIES	SEC US	EONLY
NOTICE OF SALE OF SECURITIES	Prefix	Serial
PURSUANT TO REGULATION D,		
SECTION 4(6), AND/OR	DATE RE	CEIVED
UNIFORM LIMITED OFFERING EXEMPTION		
	100	<u> </u>

Name of Offering (check if this is an amendment and name has changed, and indicate ch	ange.)
Perseus Group, LLC – Units of Limited Liability Company Interests	
Filing Under (Check box(es) that apply Rule 504 Rule 505 Rule 506 So	ection 4(6) ULOE
Type of Filing: New Filing	16.
A. BASIC IDENTIFICATION DATA	1 AUF 9 1 6003 > 2
Enter the information requested about the issuer	The state of the s
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Perseus Group, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code):
150 California Street, San Francisco, CA 94111	(415) 834-9400
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	
Investment Banking and Strategic Consulting.	
Type of Business Organization	
Corporation limited partnership, already formed	other (please specify): limited liability
☐ Business trust ☐ limited partnership, to be formed	company, already formed
Month Year	BOOCESSED
Actual or Estimated Date of Incorporation or Organization: $0 \mid 6$ $\boxed{0 \mid 3}$ \boxed{x} Actual	d Estimated PROCESSES
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	
CN for Canada; FN for other foreign jursidic.	ation) DE AUG 25 2003
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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 in 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)
Baldwin, Geoffrey D.
Business or Residence Address (Number and Street, City, State, Zip Code)
150 California Street, San Francisco, CA 94111
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
Managing Partner
Full Name (Last name first, if individual)
Callander, Clark N.
Business or Residence Address (Number and Street, City, State, Zip Code)
150 California Street, San Francisco, CA 94111
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or
Managing Partner
Full Name (Last name first, if individual)
Carter, Todd J.
Business or Residence Address (Number and Street, City, State, Zip Code)
150 California Street, San Francisco, CA 94111
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
Managing Partner
Full Name (Last name first, if individual)
Greer, Christopher W.
Business or Residence Address (Number and Street, City, State, Zip Code)
150 California Street, San Francisco, CA 94111
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
Full Name (Last name first, if individual) Managing Partner
Johnson, James A.
Business or Residence Address (Number and Street, City, State, Zip Code)
2099 Pennsylvania Avenue, Suite 900, Washington, D.C. 20006
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Maginn, Jr., Robert A.
Business or Residence Address (Number and Street, City, State, Zip Code)
5 Cambridge Center, 11 th Floor, Cambridge, MA 02139
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner of Issuer
Full Name (Last name first, if individual)
McCaffery, Michael G.
Business or Residence Address (Number and Street, City, State, Zip Code)
150 California Street, San Francisco, CA 94111

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

PLOYO IN ENTIRE CAMPONIA PARTI
A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following:
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 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)
Pearl, Frank H.
Business or Residence Address (Number and Street, City, State, Zip Code)
2099 Pennsylvania Avenue, Suite 900, Washington, D.C. 20006
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
Managing Partner
Full Name (Last name first, if individual)
Perseus Holdings, L.L.C.
Business or Residence Address (Number and Street, City, State, Zip Code)
2099 Pennsylvania Avenue, Suite 900, Washington, D.C. 20006
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 of Issuer
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
Full Name (Last name first, if individual) Managing Partner
Ton Panie (Last name 1115t, it illusvidual)
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.)

			 .		В.	INFORM	ATION AI	BOUT OFF	ERING				·	
								 -					Yes N	0
1.	Has th	he issuer s	old, or does						is offering?					3
2.	What	is the mir	imum inva					_	under ULO				\$ N/A	
۷.	wiiai	is the min	mnum mve	stificit tilat	will be acci	epied Holli a	my marvide	ıaı:					Yes No	_
3.	Does	the offerin	ng permit jo	oint ownersl	hip of a sing	gle unit?							🛛 🗆	
4.									or given, di					
									the offering list the nar					
	person	ns to be li	sted are ass	ociated pers					rth the info					
		(Last nan	ne first, if in	ndividual)										
N/A		n Dosidon	00 A ddm000	(Mumb or or	ad Street C	ity State 7	in Codo)							
Dusi	mess o	or Residen	ce Address	(Number a	na Street, C	ity, State, Z	ip Code)							
Nam	ne of A	ssociated	Broker or I	Dealer								<u> </u>		
State	es in W	Vhich Pers	son Listed F	las Solicite	d or Intends	to Solicit F	urchasers							
(Che	eck "A	II States"	or check in	dividual Sta	ates)								All Stat	tes
[AL	7	[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]	
[M]		[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 nan	ne first, if ir	ndividual)										
Busi	ness o	r Residen	ce Address	(Number at	nd Street, C	ity, State, Z	ip Code)		1			_		
Nam	ne of A	ssociated	Broker or I	Dealer		<u> </u>								
				las Solicite		to Solicit P	urchasers							
(Che	ck "A	ll States"	or check in	dividual Sta	ates)								All Stat	tes
[AL	1	[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]	
[M]		[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	(I ast nan	ne first, if ir	adividual)					<u> </u>					
ı un	TTUTTE	(Dust Huit	11131, 11 11	iai viduui)										
Busi	ness o	r Residen	ce Address	(Number at	nd Street, C	ity, State, Z	ip Code)			<u> </u>				•
Nam	ne of A	ssociated	Broker or I	Dealer										
State	es in W	Vhich Pers	on Listed F	Has Solicited	d or Intends	to Solicit P	urchasers		"					
				dividual Sta			4.01.40015						All Stat	tes
ГАТ	1	f A 121	[A 77]	f A TO T	[C 4.]	[CO]	(CT)	IDE	(DC)	CTCT: 3	[C A]	בדדד	נודטי	
[AL [IL]	-	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI]	[ID]	
[IL]		[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[MS] [OR]	[MO] [PA]	
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

	·		
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		\$
	Equity		\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify): Capital Units (limited liability company interests)(*)	\$ 11,000,000	\$ 11,000,000
	Total	\$	\$
	The described Capital Units were issued in consideration of certain cash capital contributions and commutation, 6,886.1788 Management Share Units were issued in consideration of services prov		
	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 of	Dollar Amount
		Investors	of Purchases
	Accredited Investors		<u>\$ 11,000,000</u>
	Non-Accredited Investors		\$ 0
	Total (for filings under Rule 504 only)		\$
	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.		
	Towns of Official	Type of	Dollar Amount
	Type of Offering	Security	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		□ \$
	Printing and Engraving Costs		□ \$
	Legal Fees		\$ 100,000
	Accounting Fees		☐ \$
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)		□ s
	Other Expenses (identify)		
	Total		□ • 100 000

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

(*) Only a portion of the \$11,000,000 in capital commitments has been paid to the Issuer as of the date hereof. The remainder of commitments will be made from time-to-time as determined by the Issuer's Board of Directors. 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, & Pay Affiliates Ott Salaries and fees	900,000 (*) f the capital
(*) Only a portion of the \$11,000,000 in capital commitments has been paid to the Issuer as of the date hereof. The remainder of commitments will be made from time-to-time as determined by the Issuer's Board of Directors. 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, & Pay Affiliates Ott Salaries and fees	
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, & Pay Affiliates Out Salaries and fees	
Officers, Directors, & Pay Affiliates Ott Salaries and fees	
Officers, Directors, & Pay Affiliates Ott Salaries and fees	
Salaries and fees	
Salaries and fees	ments to
Purchase of real estate	hers
Purchase of real estate	
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)	
Offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger). Repayment of indebtedness. Working capital. Other (specify) S S S S S S S S S S S S S	
Repayment of indebtedness \$	
Working capital \$	
Other (specify)	
	10,900,000
Column Totals	10,900,000
Total Payments Listed (column totals added)	-
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 signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	
ssuer (Print or Type) Date	
Perseus Group, LLC August 20, 2003	
Name of Signer (Print or Type) Title of Signer (Print or Type)	
Clark N. Callander Operating Member	

-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 C.F.R. 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No
	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 a C.F.R. 239.500) at such times as required by state law.	filed, a notice on Fo	rm D (17
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information offerees.	on furnished by the	issuer to
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be en Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the has the burden of establishing that these conditions have been satisfied.		
	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its y authorized person.	behalf by the unders	igned
Issu	uer (Print or Type) Signature	Date	
Per	rseus Group, LLC	August <u>≥2∂</u> , 2003	
Nar	me (Print or Type) Title (Print or Type)		
Cla	rk N. Callander Operating Member		

Instructions:

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	Intend non-ac investor	to sell to credited is in State –Item 1)	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)			Disqua under St (if yes explan waiver	Disqualification under State ULOE (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										
AK										
AZ										
AR										
CA		X	(1), (2)	5	\$4,100,000	-0-	\$0		X	
СО	:									
CT										
DE									-	
DC		x	(1)	1	\$6,500,000	-0-	\$0		X	
FL										
GA										
HI										
ID										
IL										
IN									_	
IA										
KS										
KY										
LA										
ME										
MD				_						
MA		Х	(1)	1	\$400,000	-0-	\$0		Х	
MI										
MN										
MS										
МО										
MT										

APPENDIX

1	Type of security and aggregate offering price investors in State (Part B–Item 1) 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)					Disqualification under State ULOE (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
NE	103			1111000010		III.			
NV									
NH									
NJ			,						
NM									
NY									
NC					· ·				
ND									
ОН									
OK									
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI									
WY									
PR									

^{(1) 11,000} Capital Units of the Issuer were issued at a per unit price of \$1,000.(2) 6,886.1788 Management Share Units of the Issuer were issued in consideration of services provided or to be provided to the Issuer.