FORM D

2005

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

POTORM LIMITED OFFERING EXEMPTION

1000796



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Prefix	•	Serial
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	Date Received	
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	000 8	<i>, V</i>	
Name of Offering (check if this is an amendment and name has changed, and indi	ate change.)		
Offering and Sale of Series C-1 and Series C-2 Preferred Stock			
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 50	6 🔲 Section	4(6) ULOE	
Type of Filing: New Filing Amendment			
A. BASIC IDENTIFICATION DA	ГА		
Enter the information requested about the issuer			
Name of Issuer (Check if this is an amendment and name has changed, and indicate	change.)		
Integrated Development Enterprise, Inc.			
Address of Executive Offices (Number and Street, City, State, Zi		phone Number (Including	g Area Code)
150 Baker Avenue Extension; Concord, MA 01742-2174		318-9380	
Address of Principal Business Operations (Number and Street, City, State, Zi (if different from Executive Offices)	Code) Telep	phone Number (Including	g Area Code)
(ii different from Executive Offices)			
Brief Description of Business		1	
The development and sale of software to integrate and manage product development proc	sses through the	development chain.	TRUCESSED
			MAR 1 7 2005
Type of Business Organization			THOMSON E
☐ corporation ☐ limited partnership, already formed	∐ other (p	olease specify):	FINANCIAL
business trust limited partnership, to be formed			
Month O L	Year		
Actual or Estimated Date of Incorporation or Organization:	9 8		nated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbre			
CN for Canada; FN for other foreign juris		M A	
	•		İ

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 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.

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 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. Promoter Beneficial Owner ☐ Executive Officer ☐ General and/or Check Box(es) that Apply: □ Director Managing Partner Full Name (Last name first, if individual) McGrath, Michael Business or Residence Address (Number and Street, City, State, Zip Code) 150 Baker Avenue Extension; Suite 207; Concord, MA 01742-2174 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Forlenza, Robert Business or Residence Address (Number and Street, City, State, Zip Code) 50 Rowes Wharf, 6th Floor, Boston, MA 02110 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Slamp, Jim Business or Residence Address (Number and Street, City, State, Zip Code) Integrated Development Enterprise, Inc.; 150 Baker Avenue Extension; Concord, MA 01742-2174 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Divino, Craig Business or Residence Address (Number and Street, City, State, Zip Code) Integrated Development Enterprise, Inc.; 150 Baker Avenue Extension; Concord, MA 01742-2174 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Moore, Richard S. Business or Residence Address (Number and Street, City, State, Zip Code) Integrated Development Enterprise, Inc.; 150 Baker Avenue Extension; Concord, MA 01742-2174 Check Box(es) that Apply: Promoter ☐ Beneficial Owner □ Director ☐ Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Quinn, Eugene F. Business or Residence Address (Number and Street, City, State, Zip Code) Confluence Capital Partners; 284 Newtown Turnpike; Weston, CT 06883 □ Director Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Ricci, Stephen J. (Number and Street, City, State, Zip Code) Business or Residence Address OneLiberty Ventures; 150 CambridgePark Drive; Cambridge, MA 02140

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if ir Rawley, Curt	ndividual)				7 - 100
Business or Residence Address Integrated Development Enterpr		er and Street, City, State, Z Avenue Extension; Conco			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if ir OneLiberty Advisors Fund IV, I			700		
Business or Residence Address 150 Cambridge Park Drive, 10 th		er and Street, City, State, Z MA 02140	ip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in Tudor Ventures II L.P.	ndividual)				
Business or Residence Address 50 Rowes Wharf, 6 th Floor, Bos		er and Street, City, State, Z	Cip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
HarbourVest Partners, LLC					
Business or Residence Address One Financial Center, 44 th Floor		er and Street, City, State, Z	(ip Code)		

				INFO	RMATION	ABOUT	OFFERIN	G				
1. Has the is:	suer sold, o	r does the is	ssuer intend	to sell, to	non accredi	ted investo	rs in this of	fering?				No ⊠
			Ans	wer also in	Appendix,	Column 2,	if filing und	der ULOE.				
2. What is th	e minimum	n investmen	t that will b	e accepted	from any in	ıdividual?					\$	
				_							Yes	No
3. Does the o	offering per	mit joint ov	vnership of	a single un	it?			······································	••••	,	\boxtimes	
4. Enter the irremuneration agent of a bropersons to be Full Name (L.	for solicita ker or deal listed are a	ition of pure er registered ssociated p	chasers in c d with the S ersons of su	onnection v SEC and/or	with sales of with a state	f securities or states, I	in the offer ist the name	ing. If a pe e of the bro	rson to be l ker or deale	isted is an er. If more	associate than five	d person or
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	ah Darson I	istad Uas 9	Colinitad or	Intends to	Solioit Dura	hacara						
							····					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				0	St	2-4->						
Business or R	tesidence A	adress (Nu	mber and S	treet, City,	State, Zip C	lode)						
Name of Asso	ociated Bro	ker or Deal	er									
States in Whi	ch Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers						
											_	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[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 11	rst, it indivi	iduai)									
					0 7: 6		-					
Business or R	lesidence A	idaress (Nu	mber and S	treet, City,	State, Lip (lode)						
Name of Asso	ociated Bro	ker or Deal	er				<u>.</u>					
States in Whi					Solicit Purc					_		All States
(Check .	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(iL)	[N]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(RII	(SC)	IDJ .	(TNI	(TXI	ווודו	[VT]	[VA]	[WA]	twvi	ıwı	IWYI	[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

a c	Enter the aggregate offering price of securities included in this offering and the total amount lready sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, heck this box \square and indicate in the columns below the amounts of the securities offered for exchange		
a	nd already exchanged. Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	_	
	Equity		
	Equity	Ψ	\$_ <u>\$</u>
	☐ Common ☒ Preferred		
	Convertible Securities (including warrants) Series C-1 and Series C-2 Convertible Preferred Stock	\$ 2,000,000	\$1,000,000
	Partnership Interests	\$_0	\$0
	Other (Specify)	\$ <u>0</u>	\$0
	Total	\$ 2,000,000	\$1,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.	+ <u>x</u>	4 <u>-011-04-0</u>
o tl	Enter the number of accredited and non-accredited investors who have purchased securities in this ffering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate he number of persons who have purchased securities and the aggregate dollar amount of their purchases in the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amoun of Purchases
	Accredited Investors		\$ <u>1,000,000</u>
	Non-accredited Investors	_0	\$0
	Total (for filings under Rule 504 only)	_NA	\$NA
	Answer also in Appendix, Column 3, if filing under ULOE.		
S	f this filing is for an offering under Rule 504 or 505, enter the information requested for all securities old 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	Dollar Amoun
	Rule 505	SecurityNA	Sold \$ <u>NA</u>
	Regulation A	NA	
	Rule 504	NA	
	Total	NA	\$_NA
4. ε	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_0
	Printing and Engraving Costs		S 0
	Legal Fees	,,,,,,	S <u>20,000</u>
	Accounting Fees		S_0
	Engineering Fees		S_0
	Sales Commissions (specify finders' fees separately)		\$_0
	Other Expenses (identify)		S_0
	Total		⊠ ¢ 20.000

C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSES AND USE O	OF PROCEEDS					
 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." 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 							
	forth in response to Part C - Question 4.b above.	Payments to Officers, Directors, & Affiliates	Payments To Others				
Salaries and fees		□ \$_0	□ \$_0				
			□ \$ 0				
	on of machinery and equipment						
· ·	gs and facilities						
	ng the value of securities involved in this	-	- V				
offering that may be used in exchange for	or the assets or securities of another	_	_				
•		□ \$ <u>0</u>	□ \$ <u>0</u>				
Repayment of indebtedness		\$_0	□ \$ <u>0</u>				
Working Capital		□ \$ <u>0</u>	⊠ \$ <u>980,000</u>				
Other (specify):		\$ 0	\$_0				
		\$ 0	□ \$ <u>0</u>				
Column Totals		\$	\$980,000				
Total Payments Listed (Column totals ac	ided)	⊠ \$ <u>98</u>	0.000				
D. FEDERAL SIGNATURE							
following signature constitutes an undertaking	ned by the undersigned duly authorized person. If this noting by the issuer to furnish to the U.S. Securities and Exchalissuer to any non-accredited investor pursuant to paragraph	nge Commission, up					
Issuer (Print or Type) Integrated Development Enterprise, Inc.	Signature	Date MARCH	10,2005				
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
Jim Slamp	Secretary						

— ATTENTION ——

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