

# 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





Name of Offering ( check if this is an Offer and sale of \$150,000,000 of limited pa	amendment and name has changed, and incartner interests.	licate change.)	1333247
	☐ Rule 504 ☐ Rule 505 ☒ Rule : mendment	06 ☐ Section 4(6	) 🗖 ULOE
	A. BASIC IDENTIFICATION I	ATA	
1. Enter the information requested about the	issuer		
Name of Issuer ( Check if this is an ame Madrona Venture Fund III, L.P.	endment and name has changed, and indica	te change.)	
Address of Executive Offices	(Number and Street, City, State,	Zip Code) Telephor	ne Number (Including Area Code)
1000 Second Avenue, Suite 3700, Seattle, V	VA 98104	206-674	-3000
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State,	Zip Code) Telephor	ne Number (Including Area Code)
Brief Description of Business  Investment fund focused on venture capital	investments.		SSC WALL BECEIVED CO
Type of Business Organization			2005
☐ corporation ☐ business trust	<ul><li>☑ limited partnership, already formed</li><li>☐ limited partnership, to be formed</li></ul>	other (pleas	se specify):
Actual or Estimated Date of Incorporation o Jurisdiction of Incorporation or Organization		reviation for State:	Actual

### 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.

Persons who 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.

SEC 1972 (6-02) 1 of 9

### 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) Madrona Investment Partners III, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 1000 Second Avenue, Suite 3700, Seattle, WA 98104 Check Box(es) that Apply: ☑ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☑ General and/or Managing Partner Full Name (Last name first, if individual) Alberg, Tom A. Business or Residence Address (Number and Street, City, State, Zip Code) 1000 Second Avenue, Suite 3700, Seattle, WA 98104 Check Box(es) that Apply: ☑ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner Full Name (Last name first, if individual) Goodrich, Paul Business or Residence Address (Number and Street, City, State, Zip Code) 1000 Second Avenue, Suite 3700, Seattle, WA 98104 □ Beneficial Owner ☐ Executive Officer □ Director ☑ General and/or Check Box(es) that Apply: ☑ Promoter Managing Partner Full Name (Last name first, if individual) Gottesman, Greg Business or Residence Address (Number and Street, City, State, Zip Code) 1000 Second Avenue, Suite 3700, Seattle, WA 98104 □ Beneficial Owner ☐ Executive Officer □ Director Check Box(es) that Apply: ☑ Promoter Managing Partner Full Name (Last name first, if individual) McIlwain, Matt Business or Residence Address (Number and Street, City, State, Zip Code) 1000 Second Avenue, Suite 3700, Seattle, WA 98104 ☐ Beneficial Owner ■ Executive Officer ⊠ General and/or Check Box(es) that Apply: □ Director ☑ Promoter Managing Partner Full Name (Last name first, if individual) Hirsch, Chuck Business or Residence Address (Number and Street, City, State, Zip Code) 1000 Second Avenue, Suite 3700, Seattle, WA 98104 ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) Madrona III Manager Fund, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 1000 Second Avenue, Suite 3700, Seattle, WA 98104

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

### 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 ind	ividual)			<del></del> -	
The James Irvine Foundation					
Business or Residence Address	(Numbe	er and Street, City, State, Z	(ip Code)		
575 Market Street, Suite 3400, Sa	in Francisco, CA 9	4105			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Numb	er and Street, City, State, 2	Cip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Numb	er and Street, City, State, 2	Cip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)	<u> </u>			
Business or Residence Address	(Numb	er and Street, City, State, 2	Cip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Business or Residence Address	(Numb	er and Street, City, State, 2	Cip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	lividual)	<del></del>			
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		<del></del>

				B. INF	ORMATIO	N ABOUT	OFFERI	₹G				
1. Has the iss	uer sold or	does the is	suer intend	to sell to t	on accredit	ed investor	s in this off	Pering?				No ⊠
1. 1145 (1)0 135	uer 301 <b>u</b> , 01	does the is		,				Ū			· ·	2
			Ansv	wer also in	Appendix, (	Column 2, i	f filing und	ler ULOE.				
2. What is the	minimum	investment	that will b	e accepted	from any in	dividual?					\$ 5,000,0	<u>)00</u> *
* The Genera	l Partner, ii	n its sole di	scretion, m	ay accept a	lower inves	stment amo	unt.					
, ,	cc. ·	** * * *	1: 0									No —
3. Does the o	itering peri	nit joint ow	nership of	a single un	it7		••••••••••	*****************	***************************************			
4. Enter the in remuneration agent of a bro persons to be Full Name (La	for solicita ker or deale listed are a	tion of purc er registered ssociated pe	hasers in co I with the Sersons of su	onnection v EC and/or	vith sales of with a state	securities in or states, li	n the offeri	ng. If a per of the brol	son to be li ter or deale	sted is an	associated than five	d person or
Business or R	esidence A	ddress (Nu	nber and S	treet, City,	State, Zip C	Code)						
Name of Asso	ciated Bro	ker or Deale	er									
States in Whi												
(Check "A	All State" o [AK]			<b>.</b>		[CT]		[DC]		[GA]	D.A	All States
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[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		<del></del>		[]	[0.1]	1:-1	111-9	1	<u> </u>	1)	1 3	(5-25)
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Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)		_ <del></del>				
Name of Asso	ociated Bro	ker or Deal	er .	·								
States in Whi	ch Person I	isted Has S	Solicited or	Intends to	Solicit Purc	hasers		<del></del>		_		
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L				(22.5)	(-1)	<u> </u>	(,,,,)	[]	<u> </u>	()	<u> </u>	29
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Business or R	Lesidence A	ddress (Nu	mber and S	treet, City.	State, Zip C	Code)	<del></del>		<del></del> _			<del></del>
				, ,,	, .	,						
Name of Asso	ociated Bro	ker or Deal	er					<del></del>			<del></del>	
States in Whi	ch Person l	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers						
(Check "	All State" o	or check ind	ividual Sta	tes)								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]

(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	\$_0	\$ <u>0</u>
	Equity	\$_0	\$ <u>0</u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$ <u>0</u>	\$_0
	Partnership Interests	\$ 150,000,000	\$ 63,823,000
	Other (Specify)	\$_0	\$ <u>0</u>
	Total		\$ 63,823,000
	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."	Number Investors	Aggregate Dollar Amoun of Purchases
	Accredited Investors	31*	\$ <u>63,823,000</u> *
	Non-accredited Investors	_0	\$0
	Total (for filings under Rule 504 only)	N/A	\$N/A
	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, 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	Dollar Amoun Sold
	Rule 505	N/A	\$ <u>N/A</u>
	Regulation A	N/A	\$ <u>N/A</u>
	Rule 504	N./A	\$ <u>N/A</u>
	Total	N/A	\$ <u>N/A</u>
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		\$ <u>N/A</u>
	Printing and Engraving Costs	[	\$ 0
	Legal Fees		\$ 125,000
	Accounting Fees		\$ 0
	Engineering Fees		\$ N/A
	Sales Commissions (specify finders' fees separately)		\$ N/A
	Other Expenses (identify) Travel Expenses and Business Expenses		\$ 25,000
	Total		<b>3</b> \$ 150,000
	*TT : C		

<sup>\*</sup>This figure includes one foreign investor in the amount of \$5,000,000.

<sup>\*\*</sup>Total commitments to the Partnership and affiliated partnerships, including the commitment of the General Partner of the Partnership and such affiliated partnerships, is approximately \$71,000,000.

1 and total expenses furnished in re "adjusted gross proceeds to the issu	esponse to Part C - Question 4.a. This difference is the ler."	***	***************************************	\$ <u>149,850,00</u>
used for each of the purposes shown, estimate and check the box to the left	isted gross proceeds to the issuer used or proposed to be If the amount for any purpose is not known, furnish an of the estimate. The total of the payments listed must equal ter set forth in response to Part C - Question 4.b above.		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		Ø	S*	□ \$ <u>0</u>
Purchase of real estate			\$ <u>0</u>	<u>     \$                               </u>
Purchase, rental or leasing and ins	Purchase, rental or leasing and installation of machinery and equipment			
Construction or leasing of plant b	. 🏻	<u>\$ 0</u>	□ \$ <u>0</u>	
offering that may be used in exch	ncluding the value of securities involved in this ange for the assets or securities of another	_	\$_0	<b>-</b> \$ 0
Repayment of indebtedness		\$ 0	<b>5</b> 0	
Working Capital			\$_0	<b>5</b> 0
Other (specify): Venture Capital Investments.			S 0	⊠ \$ **
			s_*	⊠ \$ <u>**</u>
Total Payments Listed (Column to	D. FEDERAL SIGNATURE		⊠ \$_	149,850,000
<u> </u>		<del></del>		<del></del>
following signature constitutes an unc	be signed by the undersigned duly authorized person. If this not lertaking by the issuer to furnish to the U.S. Securities and Exc. by the issuer to any non-accredited investor pursuant to paragraphs.	hange (	Commission, up	on written reques
uer (Print or Type)	Signature		Date	·····
adrona Venture Fund III, L.P.	The City		July, 2005	5
ame of Signer (Print or Type)	Title of Signet (Print or Type)			
oy Cichos	Authorized Signatory of Madrona III General Partner, Partner of the Issuer	LLC, th	ne General Partr	ner of the General

- \*\* Unknown at this time.

# — ATTENTION —

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