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.

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
ORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

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



D E

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series B Preferred Stock Financing ☐ ULOE Filing Under (Check box(es) that apply): □ Rule 504 ☐ Rule 505 ■ Rule 506 ☐ Section 4(6) Type of Filing: ■ New Filing ☐ Amendment 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.) Jobster, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 206 1st Ave South, Suite 300, Seattle, WA 98104 (206) 826-5627 (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Address of Principal Business Operations (if different from Executive Offices) Brief Description of Business relationship based job networks Type of Business Organization □ other (please specify): SEP 1 9 2005 corporation ☐ limited partnership, already formed ☐ business trust ☐ limited partnership, to be formed THOMSON Year Month ■ Actual □ Estimated FINANCIAL Actual or Estimated Date of Incorporation or Organization: 0 1 0 4 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

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.

CN for Canada; FN for other foreign jurisdiction)

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.

·~~

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		□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Goldberg, Jason				
Business or Residence Address (Number	and Street, City, State, Zip Code	e)		
206 1 st Avenue South #300 Seattle, WA	A 98104			
Check Box(es) that Apply: Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Bogle, Phillip				
Business or Residence Address (Number	and Street, City, State, Zip Code	e)		
206 1st Avenue South #300 Seattle, WA	A 98104			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
John Connors				
John Connors Business or Residence Address (Number and Street, City, State, Zip Code)				
c/o Ignition Partners 11400 SE 6 th Stree	et. Suite 100. Bellevue. WA 9	98004		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Anderson, Jon				
Business or Residence Address (Number	and Street, City, State, Zip Code	e)		
c/o Ignition Partners 11400 SE 6 th Stree	et. Suite 100. Bellevue. WA 9	8004		
Check Box(es) that Apply: Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Ignition Venture Partners II, L.P., Ignitio	n Managing Directors Fund I	I, LLC		
Business or Residence Address (Number				
11400 SE 6 th Street, Suite 100, Bellevu	e, WA 98004			
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Morgan, Allen				
Business or Residence Address (Number	and Street, City, State, Zip Code	e)		
c/o Mayfield, 2800 Sand Hill Road, Su	ite 250, Menlo Park, CA 9402	25		

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

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;

			te general and managing parti	ners of partnership is	suers; and
• Each general and mana Check Box(es) that Apply:		rtnership issuers. ⊠Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Mavfield XI. Mavfield XI	Qualified, Mavfie	eld Associates Fund VI, Ma	vfield Principals Fund II		
		Street, City, State, Zip Code	<u> </u>		
c/o Mayfield, 2800 San	d Hill Road, Suite	e 250, Menlo Park, CA 940	25		
Check Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Nakache, Patricia					
	ress (Number and	Street, City, State, Zip Code	e)		
c/o Trinity Ventures 30	00 Sand Hill Roa	id, Building 4, Suite 160, M	lenio Park CA 94025		
Check Box(es) that Apply:	□ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Trinity Ventures VIII, L.F	P., Trinity VIII Sid	e-By-Side Fund, L.P., Trini	ty VIII Entrepreneur's Fund	l, L.P.	
		Street, City, State, Zip Code		0.1000	
c/o Trinity Ventures, 300	00 Sand Hill Roa	d, Building 4, Suite 160, Mo	enlo Park. CA 94025		
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 Add	ress (Number and	d 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 Add	ress (Number and	Street, Çity, 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 Add	ress (Number and	Street, City, State, Zip Code)		
	(Use blar	k sheet, or copy and use addi	tional copies of this sheet, as	necessary.)	

	B. INFORMATION ABOUT OFFERING	<u>. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</u>	
1	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No
1.	Answer also in Appendix, Column 2, if filing under ULOE.	П	-
2	What is the minimum investment that will be accepted from any individual?	\$ N/A_	
		Yes	No
3.	Does the offering permit joint ownership of a single unit?		
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar 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, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full	Name (Last name first, if individual)		
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)		
Nam	e of Associated Broker or Dealer		
04			
	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers	— 411	C+-+
[] []	heck "All States" or check individual States)	All ID MO PA PR	States
Full	Name (Last name first, if individual)		
Busin	ness or Residence Address (Number and Street, City, State, Zip Code)		
Nam	e of Associated Broker or Dealer		
State	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
	heck "All States" or check individual States) AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	☐ All [ID] [MO] [PA] [PR]	States
Full 1	Name (Last name first, if individual)		
Busir	ness or Residence Address (Number and Street, City, State, Zip Code)		
	, , , , , , , , , , , , , , , , , , ,		
Name	e of Associated Broker or Dealer		
State	s in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
[^ [N	heck "All States" or check individual States)	D All [ID] [MO] [PA] [PR]	States

(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 to already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange check this box □ and indicate in the columns below the amounts of the securities offered for and already exchanged.	ge offering,	
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	_	\$
Equity		
☐ Common ■ Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify)	\$	\$
Total	\$ <u>19,500,000.13</u>	\$ 19,500,000.13
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, if the number of persons who have purchased securities and the aggregate dollar amount of purchases on the total lines. Enter "0" if answer is "none" or "zero."	indicate	Aggragata
Accredited Investors	Number Investors 9	Aggregate Dollar Amount of Purchases \$ 19,500,000.13
Non-accredited Investors		
Total (for filings under Rule 504 only)		
Answer also in Appendix, Column 4, if filing under ULOE.		<u> </u>
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) mon to the first sale of securities in this offering. Classify securities by type listed in Part C - Ques	nths prior	
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$0
4. a. Furnish a statement of all expenses in connection with the issuance and distribution securities in this offering. Exclude amounts relating solely to organization expenses of the information may be given as subject to future contingencies. If the amount of an expense hot known, furnish an estimate and check the box to the left of the estimate.	he issuer.	
Transfer Agent's Fees		\$
Printing and Engraving Costs		\$
Legal Fees		\$_25,000.00
Accounting Fees		\$
Engineering Fees		\$
Sales and Commissions (specify finders' fees separately)		\$
Other Expenses (identify)		\$
Total		\$ 25,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USI	e of P	ROCEEI)S	****	
	b. Enter the difference between the aggregate offering price 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."						\$ <u>19,475,000.</u>
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 the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.						
			Off Direc	nents to ficers, ctors, & iliates			Payments to Others
	Salaries and fees					\$_	——————————————————————————————————————
	Purchase of real estate		\$			\$_	
	Purchase, rental or leasing and installation of machinery and equipment		\$			\$_	
	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)		\$			\$_	
	Repayment of indebtedness		\$			\$_	
	Working capital		\$		-	\$.	19,475,000.13
	Other (specify):		\$			\$_	
			\$			\$_	
	Column Totals		\$	0		\$_	19,475,000.13
	Total Payments Listed (column totals added)			□ \$ <u>19</u>	9,475	,00	0.13
	D. FEDERAL SIGNATURE				- 1450 ·		
follo	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If wing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Excestaff, the information furnished by the issuer to any non-accredited investor pursuant to paragraphs.	hang	e Comn	nission, u			
	er (Print or Type) ter, Inc. Signature			Dat	9/7	ı/ê	
Nam	e of Signer (Print or Type) Title of Signer (Print or Type)			<u> </u>			
Gler	R. Van Ligten Assistant Secretary						
	ATTENTION				·		
	Intentional misstatements or omissions of fact constitute federal criminal v	/iola	itions.	(See 1	8 U.S	s.c	. 1001.)

				AP	PENDIX					
1	Intend to non-a investor	to sell ccredited s 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)				5 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	Series B Preferred Stock; \$15,443,750.27	7	\$15,443,750.27	0	\$0.00		Х	
CO	_									
CT										
DE										
DC										
FL										
GA										
HI										
ID										
IL										
IN										
ΙA										
KS										
KY										
LA										
ME										
MD										
MA										
MI										
MN										
MS										
МО										

				AP	PENDIX*						
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	News	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)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
MT											
NE											
NV											
NH						,					
NJ											
NM											
NY			G								
NC											
ND											
ОН											
OK			,								
OR											
PA								_			
RI											
sc											
SD											
TN											
TX											
UT											
VT											
VA											
WA		X	Series B Preferred Stock; \$4,056,249.86	2	\$4,056,249.86	0	\$0.00		Х		
WV											
WI											
WY		ļ									
PR											