## 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 NIFORM LIMITED OFFERING EXEMPT

1346454

OMB APPROVAL
OMB Number: 3235-0076
Expires:

Estimated average burden hours per response.....16.00

SEC USE ONLY									
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05074061	SECTION 4(0), AND/OR	WHE RECEIVED
•	UNIFORM LIMITED OFFERING EXEM	IPTION L
Name of Offering ( check if to	his is an amendment and name has changed, and indicate change.)	RECEIVED
Filing Under (Check box(es) that at Type of Filing: New Filing	oply): Rule 504 Rule 505 Rule 506 Section 4(6	DEC 0 6 2005 >>
	A. BASIC IDENTIFICATION DATA	
I. Enter the information requeste	d about the issuer	105 (6)
Name of Issuer ( check if this THREE CIRCLES FUND, LLC	is an amendment and name has changed, and indicate change.)	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1625 Larimer Street, #1807, De	enver, Colorado 80202	(303) 893-3406 PPOCESSED
Address of Principal Business Oper (if different from Executive Offices		Telephone Number (Including Area Code)  DEC 1 2 2005
Brief Description of Business		
Organized to invest in securitie	s and other financial instruments.	HOMSON FINANCIAL
Type of Business Organization  corporation business trust	limited partnership, already formed other ( limited partnership, to be formed	please specify): LLC, already formed
Actual or Estimated Date of Incorporation or Org	Month Year  oration or Organization: 111 02 Actual Estimatization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making a 77d(6).	n 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.
and Exchange Commission (SEC) or	ed no later than 15 days after the first sale of securities in the offering n the earlier of the date it is received by the SEC at the address given b nailed 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. 20	<b>9549</b> .
Coptes Required: Five (5) copies of photocopies of the manually signed	f this notice must be filed with the SEC, one of which must be manual copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
	must contain all information requested. Amendments need only report Part C, and any material changes from the information previously supp	
Filing Fee: There is no federal filin	ng fee.	
ULOE and that have adopted this f are to be, or have been made. If a	e reliance on the Uniform Limited Offering Exemption (ULOE) for some Issuers relying on ULOE must file a separate notice with the state requires the payment of a fee as a precondition to the claim for shall be filed in the appropriate states in accordance with state law.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall

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 predictated on the filling of a federal notice.

SEC 1972 (6-02)

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.

1 of 9



### X BXSIC DENTIFICATION DATA 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) HOAG, JEFFREY A. Business or Residence Address (Number and Street, City, State, Zip Code) 1625 Larimer Street, #1807, Denver, CO 80202 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: ☐ Beneficial Owner ☐ Executive Officer Promoter 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: Executive Officer Promoter Beneficial Owner General and/or Director 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: Beneficial Owner Executive Officer Promoter 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)

					. B. I	<b>YE</b> ÖRMAT	ION ABQU	T ÓFFERI	NG				
1.	Has the	issuer sold	i, or does th	ie issuer ii	ntend to se	ll. to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No <b>E</b>
• •	1145 1110	133401 3011	2, 0. 2005			Appendix						Span-	_
2.	2. What is the minimum investment that will be accepted from any individual?										\$_ <del>5</del> 0,	00.00	
												Yes	No
3.			permit join(									K	
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.													
Ful		Last name	first, if indi	vidual)									
		Residence	Address (N	umber and	i Street, C	ity, State, Z	(ip Code)		<del></del>				
Du.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,												
Nar	ne of Ass	ociated B	oker or Dea	iler									
Sta	tes in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers			· <u>····</u>			
	(Check	"All States	s" or check	individual	States)			•••••		***************************************		All States	
	AL	AK	AZ	AR	CA	CO	[CT]	DE	DC	FL	GA	HI	ID
	ĪL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM (TIT)	NY	[NC]	ND WA	OH WV	OK WI	OR WY	PA
	RI	SC	SD	TN	[TX]	UT]	VT	VA	WA	( <u>w</u> v)	[WI]	WI	<u> </u>
Ful	l Name (	Last name	first, if indi	vidual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)	<del></del>	-	· · · · · ·	·		
Nai	me of Ass	sociated Br	roker or Dea	aler			<u>.</u>	****		<del></del>			
Sta			Listed Has										
	(Check	"All States	or check	individual	States)			••••••••••	***********			☐ Al	1 States
	AL	AK	AZ	AR	CA	[CO]	CT	DE	DC	FL	GA	HI	ID
		IN	[A]	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful			first, if indi										
Bus	siness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)			,			
Nar	ne of Ass	sociated Br	oker or Dea	iler						<del></del>			
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers						
	(Check	"All States	s" or check	individual	States)	••••••			••••••	······································		☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	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 Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the 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. Amount Already Aggregate Offering Price Type of Security Sold Equity ......\$ Common Preferred Convertible Securities (including warrants) ) .......\$\_ Total \$\_10,000,000.00 Answer also in Appendix, Column 3, if filing under ULOE. 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 Dollar Amount of Purchases Investors Accredited Investors Non-accredited Investors 0 Total (for filings under Rule 504 only) ..... 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 C — Question 1. Dollar Amount Type of Type of Offering Security Sold Rule 505 Regulation A Rule 504 ..... \$ 0.00 Total \_\_\_\_\_\_ 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 insurer.

Sales Commissions (specify finders' fees separately).... 500.00 Other Expenses (identify) 10,000.00 \* Total .....

0.00

500.00 \$

7,000.00

2,000.00

0.00

The information may be given as subject to future contingencies. If the amount of an expenditure is

Transfer Agent's Fees Printing and Engraving Costs.....

Legal Fees.....

Accounting Fees Engineering Fees

not known, furnish an estimate and check the box to the left of the estimate.

<sup>\*</sup>To be paid by a third party and not as a deduction from proceeds.

Salar Purci and c Cons Acqu	ries and fees	s 0.00	Payments to Others  \$ 0.00		
Purci Purci and c Cons Acqu	hase of real estatehase, rental or leasing and installation of machinery equipment	s 0.00			
Purch and c Cons Acqu	hase, rental or leasing and installation of machinery equipment	<u> </u>	- Us———		
and c Cons Acqu	equipment	<u>\$ 0.00</u>			
Cons Acqu	struction or leasing of plant buildings and facilities		\$ 0.00		
Acqu	<del>-</del> •	s 0.00	\$ 0.00		
issue	aisition of other businesses (including the value of securities involved in this ring that may be used in exchange for the assets or securities of another r pursuant to a merger)	s_0.00	\$_0.00		
	yment of indebtedness		s 0.00		
	king capital		<b>\$0.00</b>		
Othe	r (specify): Acquire investment securities and other financial instruments.	\$ <u>0.00</u>	\$_10,000,000.00		
		 [\$	<b>s</b>		
Colu	mn Totals	s_0.00	\$_10,000,000.00		
Tota	Payments Listed (column totals added)	<u>\$ 10,000,000.00</u>			
signature the inform	r has duly caused this notice to be signed by the undersigned duly authorized person. If this constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Contain furnished by the issuer to any non-accredited investor pursuant to paragraph (b)	Commission, upon writte 0(2) of Rule 502.			
	CIRCLES FUND, LLC	11-10-2005			
Name of S Jeffrey A.	Signer (Print or Type)  Hoag  Manager				

		E. STATESTICNATE	RE DE STATE DE STATE						
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?								
		See Appendix, Column 5, for s	tate response.						
2.	The undersigned issuer hereby undertake D (17 CFR 239.500) at such times as r	•	ator of any state in which this no	otice is filed a not	tice on Form				
3.	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.								
	er has read this notification and knows the chorized person.	e contents to be true and has duly ca	used this notice to be signed on	its behalf by the	undersigned				
Issuer (	Print or Type)	Signature/	Date						
THREE	CIRCLES FUND, LLC	Moul Au	11-10-20	05					
Name (	Print or Type)	Till (Print or Type)							

#### Instruction:

Jeffrey A. Hoag

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 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)					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		×										
со		×										
СТ												
DE												
DC												
FL												
GA												
ні												
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IL		×										
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IA												
KS	***************************************											
KY		×										
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ME												
MD												
MA												
MI												
MN												
MS						·						

To the same			APP	ENDIX :	Sent and the second			
Intend to non-a investor	to sell accredited as in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State				
Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
		,						
	×							
	×							
							The second secon	
	Intend to non-a investor (Part B		Intend to sell to non-accredited investors in State (Part B-Item 1)  Yes No  No  X  X  X  X  X  X  X  X  X  X  X  X  X	Intend to sell to non-accredited investors in State (Part B-Item 1)  Yes No No Number of Accredited Investors	Intend to sell to non-accredited investors in State (Part B-Item 1)  Yes No No Nomber of Accredited Investors Manual aggregate offered in state (Part C-Item 1)  Number of Accredited Investors  Amount  X Number of Accredited Investors  X No X Nomber of Accredited Investors  X Nomber of Accredited Investors  X No X Nomber of Accredited Investors  X Nomber of Accredited Investor	Intend to sell to non-accredited investors in State (Part B-Item 1)  Yes No No Number of Accredited Investors Manual Investors  No Number of Accredited Inve	Intend to sell to non-accredited investors in State (Part C-Item 1)  Yes No No Number of Accredited Investors Non-Accredited Investors Non-Accredi	Intend to sell to non-accredited investors in State (Part B-Item 1)   Type of security and a aggregate offering price offered in state (Part C-Item 1)   Part C-Item 1)   Part C-Item 1)   Part C-Item 2   P

1.00	APPENDIX											
1	Type of security and aggregate to non-accredited investors in State (Part B-Item 1)  Type of security and aggregate offering price offered in state (Part C-Item 1)				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			
WY												
PR												