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** UNIFORM LIMITED OFFERING EXEMPTION

| 81 | | 5 | 16 | | | | | | |
|-----------|--------------|--------|----------|--|--|--|--|--|--|
| OM | OMB APPROVAL | | | | | | | | |
| OMB Nur | nber: | 3 | 235-0076 | | | | | | |
| Expires: | Ap | ril 30 |), 2008 | | | | | | |
| Estimated | aver | age b | urden | | | | | | |

hours per response

| SEC US | E ONLY |
|---------|--------|
| Prefix | Serial |
| 1 | |
| DATE RE | CEIVED |
| - | |

| Name of Offering (check if this | is an amendment and name has changed, and indicate change.) | |
|--|--|--|
| Sale of common stock | | |
| Filing Under (Check box(es) that apply Type of Filing ☑ New Filing |): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐ Amendment | Section 4(6) Secti |
| | A. BASIC IDENTIFICATION DATA | 2000 B 0000 |
| 1. Enter the information requested a | bout the issuer | JAM D & COUR |
| Name of Issuer (☐ check if this Simtek Corporation | is an amendment and name has changed, and indicate change.) | 152 /29 |
| Address of Executive Offices | (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| 4250 Buckingham Drive, | Suite 100 Colorado Springs, CO 80907 | 719-531-9444 |
| Address of Principal Business Operatio (if different from Executive Offices) | · · · · · · · · · · · · · · · · · · · | Telephone Number (Including Area Code) |
| • | tek provides integrated circuits to the electronics ma ontrollers, electric meters and military systems | rket for use in a variety of systems, such as |
| Type of Business Organization ☑ corporation ☐ business trust | | er (please specify): PROCESSED |
| Actual or Estimated Date of Incorporat | ion or Organization: Month Year 1986 | ✓ Figure 10 2000 Mactual Destinated TEOMSON |
| Jurisdiction of Incorporation or Organia | zation: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) | CO FINANCIAL |
| GENERAL INSTRUCTIONS | | |
| Federal: Who Must File: All issuers making a 77d(6). | n offering of securities in reliance on an exemption under Regulation | on D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C |
| | I no later than 15 days after the first sale of securities in the offering arlier of the date it is received by the SEC at the address given below | e e e e e e e e e e e e e e e e e e e |

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.

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 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 ☑Executive Officer ☐ Beneficial Owner ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Harold Blomquist Business or Residence Address (Number and Street, City, State, Zip Code) Colorado Springs, CO 80907 4250 Buckingham Dr., Ste. 100 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Brian Alleman Business or Residence Address (Number and Street, City, State, Zip Code) 4250 Buckingham Dr., Ste. 100 Colorado Springs, CO 80907 Check Box(es) that Apply: ☐ Beneficial Owner ☑Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) David W. Still Business or Residence Address (Number and Street, City, State, Zip Code) 4250 Buckingham Dr., Ste. 100 Colorado Springs, CO 80907 Executive Officer Check Box(es) that Apply: ☐ Beneficial Owner ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Alfred Stein Business or Residence Address (Number and Street, City, State, Zip Code) Los Altos, CA 94022 410 Old Oak Court Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Robert H. Keeley Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 240 Hillside, CO 81232 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Ronald Sartore Business or Residence Address (Number and Street, City, State, Zip Code) Poway, CA 92064 14445 Cypress Point Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Robert Pearson Business or Residence Address (Number and Street, City, State, Zip Code) Suite 210-LB59, Dallas, TX 75203 8080 N. Central Expressway

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

| Check Box(es) that Apply: | Promoter | ☑ Beneficial Owner | ☐Executive Officer | ☐ Director | ☐ General and/or Managing Partner | |
|-----------------------------------|------------|-----------------------|------------------------|------------|--------------------------------------|---------------------------------------|
| Full Name (Last name first, if in | dividual) | | | | | |
| Crestview Capital Ma | ster LLC | | | | | |
| Business or Residence Address | | (Number and Street, C | City, State, Zip Code) | | | |
| 95 Revere Drive, Suit | e A | Northbrook, 1 | IL 60062 | | | |
| Check Box(es) that Apply: | Promoter | Beneficial Owner | □Executive Officer | ☐ Director | ☐ General and/or Managing Partner | • |
| Full Name (Last name first, if in | dividual) | V-71 | | | | |
| Business or Residence Address | | (Number and Street, C | 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 in | dividual) | | | | | |
| Business or Residence Address | | (Number and Street, C | 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 ir | dividual) | | | | | |
| Business or Residence Address | | (Number and Street, 0 | City, State, Zip Code) | | | |

| | B. INFORMATION ABOUT OFFERING | | |
|--------|--|--------------|---|
| | | Yes | No |
| 1. | Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? | | \square |
| | Answer also in Appendix, Column 2, if filing under ULOE. | _ | |
| 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? | \square | |
| 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 or 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 N | ame (Last name first, if individual) | | |
| C.E. | Unterberg, Towbin | | |
| Busine | ess or Residence Address (Number and Street, City, State, Zip Code) | | |
| 275 1 | Middlefield Rd., Menlo Park, CA 94025 | | |
| | of Associated Broker or Dealer | | |
| | | | |
| States | in Which Person Listed Has Solicited or Intends to Solicit Purchasers | | |
| | <u> </u> | 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 NE NV NH NJ NM X NY NC ND OH OK | OR | PA |
| | RI SC SD TN $_{\rm X}$ TX UT VT VA WA WV $_{\rm X}$ WI | WY | PR |
| Full N | ame (Last name first, if individual) | | |
| | | | |
| Busine | ess or Residence Address (Number and Street, City, State, Zip Code) | | |
| | · | | |
| Name | of Associated Broker or Dealer | | |
| | | | |
| States | in Which Person Listed Has Solicited or Intends to Solicit Purchasers | | |
| (| Check "All States" or check individual States) | 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 |
| | | كت | |
| Full N | ame (Last name first, if individual) | | |
| | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Busin | ess or Residence Address (Number and Street, City, State, Zip Code) | | |
| | | | |
| Name | of Associated Broker or Dealer | | |
| | | | |
| | in Which Person Listed Has Solicited or Intends to Solicit Purchasers | ο. · | |
| (| | States HI | ΠΩΠ |
| | | | |
| | 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 \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged, | 777 | | |
| | Type of Security | Aggregate | | Amount Already |
| | | Offering Price | ¢. | Sold |
| | Debt | | \$_ | |
| | Equity | 11,000,000 | \$_ | 11,000,000 |
| | ☑ Common ☐ Preferred | | | |
| | Convertible Securities (including warrants) | | _ | |
| | Partnership Interests\$ | | | |
| | Other (Specify) | | | |
| | Total | 11,000,000 | \$ | 11,000,000 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | | |
| 2. | Enter the amount 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." | | | Aggragata |
| | | Number Investors | | Aggregate Dollar Amount of Purchases |
| | Accredited Investors | 11 | \$_ | 11,000,000 |
| | Non-accredited Investors | 0 | \$_ | 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. | 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 | | \$_ | 75,000 |
| | Accounting Fees | | \$_ | |
| | Engineering Fees | | \$_ | |
| | Sales Commissions (specify finders' fees separately) | | \$_ | |
| | Other Expenses (identify) Miscellaneous | | \$_ | 5,000 |
| | Total | | \$ | 80,000 |

| C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND | USE | OF PROCEEDS | | | |
|---|-------|---|--------|------|--------------------|
| b Enter the difference between the aggregate offering price given in response to Part Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference "adjusted gross proceeds to the issuer." | is th | | | \$_ | 10,920,000 |
| Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be for each of the purposes shown. If the amount for any purpose is not known, furnish an est and check the box to the left of the estimate. The total of the payments listed must equ adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above. | imat | :e | | | |
| | | Officers, Directors, & Affiliates | | | Payments to Others |
| Salaries and fees | | \$ | | \$_ | 510,000 (2) |
| 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 | | \$ | _ 🗹 | \$_ | 2,410,000 |
| Other (specify): Acquisition of assets from Zentrum Mikroelektronik Dresden AG | | \$ | _ 🗹 | \$_ | 8,000,000 |
| | | \$ | | \$_ | |
| Column Totals | | \$ | | \$_ | 10,920,000 |
| Total Payments Listed (column totals added) | | ☑ \$ | 10,920 | ,000 | |

Note (1): The placement agent for the offering is entitled to receive warrants to purchase 1,062,500 shares of common stock at an exercise price of \$0.28 per share.

Note (2): The placement agent for the offering received a cash payment of \$510,000.

| | | | 5 S) | | | |
|--|--|--|-------------|--|--|--|
| | | | | | | |
| | | | | | | |
| | | | | | | |

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 following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

| Issuer (Print or Type) | Signature | Date |
|--------------------------------|---------------------------------|-------------------|
| Simtek Corporation | 1482 | January / 0, 2006 |
| Name of Signer (Print or Type) | Title of Signer (Print or Type) | |
| Harold Blomquist | Chief Executive Officer | |

-ATTENTION-

| | | E SEATE SIGNATURE | | | |
|-----|---|--|------------------------------|-----------------|---------|
| 1. | Is any party described in 17 CFR 230.262 provisions of such rule? | | | No XI | |
| | | See Appendix, Column 5, for state response. | | | |
| 2. | The undersigned issuer hereby undertakes (17 CFR 239.500) at such times as required | to furnish to any state administrator of any state in by state law. | which this notice if filed, | a notice on F | orm D |
| 3. | The undersigned issuer hereby undertakes offerees. | to furnish to the state administrators, upon written i | equest, information furnis | hed by the is | suer to |
| 4. | | issuer is familiar with the conditions that must be which this notice is filed and understands that the isolditions have been satisfied. | | | |
| | e issuer has read this notification and knows the y authorized person. | ne contents to be true and has duly caused this notice t | o be signed on its behalf by | y the undersign | ned |
| Iss | uer (Print or Type) | Signature 2 | Date | | |
| Si | mtek Corporation | 1900 | Janu | iary 🔼 , 2 | 2006 |
| Na | me of Signer (Print or Type) | Title of Signer (Print or Type) | | | |
| Ha | arold Blomquist | Chief Executive Officer | | | |

Instruction:

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.

| | | | . (4.47) N.447 | APPE | NDIX | | | | |
|-------|---------------|--|--|--------------------------------------|--|--|--------|-----|---|
| 1 | to non invest | 2 nd to sell -accredited ors in State 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) | | | | lification r State (if yes, tach ation of granted) |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| AL | | | | | | | | | |
| AK | | | | | | | | | |
| AZ | | | | | | | | | |
| AR | | | | | | | | | |
| CA | | Х | Common stock \$1,900,000 | 1 | \$1,900,000 | 0 | | | Х |
| СО | | | | | | | | | |
| СТ | | | | | | | | | |
| DE | | | | | | | | | |
| DC | | | | | | | | | |
| FL | | | | | | | | | |
| GA | | | | | | | | | |
| HI | | | | | | | | | |
| ID | | | | | | | | | |
| IL | | X | Common stock \$4,050,000 | 2 | \$4,050,000 | 0 | | | Х |
| IN | | | | | | | | | |
| IA | | | | | | | | | |
| KS | | | | | | | | | |
| KY | | | | | ļ | | | | |
| LA | | | | | | | | | |
| ME | | | | | | | | | |
| MD | | | | | | | | | |
| MA | | | | | | | | | |
| MI | | | | | | | | | |
| MN | | | | | | | | | |
| MS | | | | | | | | | |

APPENDIX

| 1 | | 2 | 3 | | | 4 | ************************************** | | 5 | | |
|-------|---------------|--|--|--------------------------------------|--|--|---|-----|--|--|--|
| | to non invest | nd to sell -accredited ors in State 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) | | | | lification r State (if yes, ach ation of granted) -Item 1) | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | | |
| MO | | | | | | | | | | | |
| MT | | | | | | | 3 10 10 10 10 10 10 10 10 10 10 10 10 10 | | | | |
| NE | | | | | | | | | | | |
| NV | | | | | | | | | | | |
| NJ | | | | | | | | | | | |
| NM | | | | | | | | | | | |
| NY | | Х | Common stock \$250,000 | 2 | \$250,000 | 0 | • | | х | | |
| NC | | | | | | | | | | | |
| ND | | | | | | | | | | | |
| ОН | | | | | | | | | | | |
| OK | | | | | | | | | | | |
| OR | | | | | | | | | | | |
| PA | | | | | | | | | | | |
| RI | | | | | | | | | | | |
| SC | | | | | | | | | | | |
| SD | | | | | | | | | | | |
| TN | | | | | | | | | | | |
| TX | | X | Common stock \$3,800,000 | 4 | \$3,800,000 | 0 | | | X | | |
| UT | | | | | | | | | | | |
| VT | | | | | | | | | | | |
| VA | | | | | | | | | | | |
| WA | | | | | | | | | | | |
| WV | | | | | | | | | | | |
| WI | | Х | Common stock \$1,000,000 | 1 | \$1,000,000 | 0 | | | X | | |

| • | .' | 1 | • |
|---|----|---|---|

| 1 | i | 2 | 3 4 | | | | | Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | |
|-------------|------------------|---|--|--|--------|--|------------|---|----|
| to r inv | to non invest | Intend to sell o non-accredited nvestors 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) | | | | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amou nt | Yes | No |
| WY | | | | | | | | | |
| PR | | | | | | | | | |