FORM D

UNITED STATES /

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 **FORM D**

OMB APPROVAL
OMB NUMBER: 3235-0076

Expires: April 30, 2008 Estimated average burden hours per response......16.00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION



	amendment and name has changed	d, and indicate change.)
Offer and sale of \$200,000,000 of limited p	partner interests.		
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505		ection 4(6) ULOE
Type of Filing: ☐ New Filing ■	Amendment		
	A. BASIC IDENTIFICA	ATION DATA	
1. Enter the information requested about the	ne issuer		
Name of Issuer (Check if this is an an	nendment and name has changed, a	nd indicate change.)	
Madrona Venture Fund III-A, L.P.			
Address of Executive Offices	(Number and Street, Cit	ty, State, Zip Code)	Telephone Number (Including Area Code)
1000 Second Avenue, Suite 3700, Seattle,	WA 98104		206-674-3000
Address of Principal Business Operations	(Number and Street, Cit	ty, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)		:	/
Brief Description of Business			
Investment fund focused on venture capital	investments.		
			FED 1 / Zald
Type of Business Organization			الماري قريد رائي المسلم
☐ corporation	☑ limited partnership, already for	rmed 🔲 o	ther (please specify)
□ business trust	☐ limited partnership, to be form	ed	
Actual or Estimated Date of Incorporation	0	Month Year 5 0 5	T
Jurisdiction of Incorporation or Organization	on: (Enter two-letter U.S. Postal Se	rvice abbreviation for	State:
	CN for Canada; FN for other for	oreign jurisdiction)	D E

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 8-

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

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Madrona Investment Partners III,	L.P.		•		
Business or Residence Address	(Numb	er and Street, City, State, Z	Zip Code)		
1000 Second Avenue, Suite 3700), Seattle, WA 9810)4			
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Alberg, Tom A.			50 - 50 - 10 - 10 - 10 - 10 - 10 - 10 -		
Business or Residence Address	(Numb	er and Street, City, State, 2	(ip Code)		
1000 Second Avenue, Suite 3700					
Check Box(es) that Apply:	☑ Promoter	□ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Goodrich, Paul					
Business or Residence Address	(Numb	er and Street, City, State, Z	(ip Code)		
1000 Second Avenue, Suite 3700	Seattle WA 9810	14			
Check Box(es) that Apply:	✓ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	lividual)				
Gottesman, Greg					
Business or Residence Address	(Numb	er and Street, City, State, Z	Lip Code)		
1000 Second Avenue, Suite 3700	Seattle WA 0810	M			
Check Box(es) that Apply:	Promoter ✓	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or
E. Il Name (Leat name East if in	411 445				Managing Partner
Full Name (Last name first, if inc	iividuai)				
McIlwain, Matt		10 0			
Business or Residence Address	(Numb	er and Street, City, State, Z	(ip Code)		
1000 Second Avenue, Suite 3700					
Check Box(es) that Apply:	▼ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Hirsch, Chuck					
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)		
1000 Second Avenue, Suite 3700), Seattle, WA 9810)4			
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)				
Madrona III Entrepreneurs Fund,	, L.P.				
Business or Residence Address		er and Street, City, State, 2	Zip Code)		
1000 Second Avenue, Suite 3700	Seattle WA 0810)4			
TOUG BECOME AVEILUE, BUILE 3/00	o, ocamo, ma oci				

				B. INF	ORMATIC	ON ABOU	r offeri	NG				
1 Use the is	suer sold o	r does the i	cuer inten	to call to	non noorodi	tad invasta	ra in this of	foring?			Yes	No
1. Has the is	suer soid, o	r does the is						Ü				⊠
			Ans	wer also in	Appendix,	Column 2,	if filing und	der ULOE.				
2. What is th	e minimun	n investmen	t that will b	e accepted	from any ir	ndividual?				•••••	\$ <u>5,000</u>	<u>,000</u> *
* The Genera	al Partner, i	n its sole di	scretion, m	ay accept a	lower inve	stment amo	ount.					
3. Does the o	efforing man	mitialut au	marahin of	'a aimala um	.:40						Yes	No
											Ø	
4. Enter the remuneration agent of a bro persons to be Full Name (L	for solicita oker or deal listed are a	ition of pure er registered ssociated p	chasers in c d with the S ersons of st	onnection of SEC and/or	with sales o with a state	f securities or states, l	in the offer ist the nam	ing. If a pe e of the bro	rson to be l ker or deale	isted is an er. If more	associate than five	ed person o
		,	,,,									
Business or F	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip (Code)						
Name of Asso	ociated Bro	ker or Deal	er									
States in Whi									····			
(Check ". [AL]			ividual Sta [AR]		[CO]			[DC]	[FL]	[GA]	 [HI]	All States [ID]
[IL]	[AK] [IN]	[AZ] [IA]	[KS]	[CA] · [KY]	[LA]	[CT] [ME]	[DE] [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.]		(111)	[]	[,,,]	[<u> [[]] </u>	[, .,]
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Business or F	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip (Code)						
				, , , , , ,	,	,						
Name of Assi	ociated Bro	ker or Deal	er				· · · · · · · · · · · · · · · · · · ·					
States in Whi	ich Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers						
•	All State" o	or check ind	ividual Sta	,	••••							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	ast name fi	rst, if indiv	idual)									
Business or F	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip (Code)						
Name of Asse	ociated Bro	ker or Deal	er			•						
States in Whi	iah Dans '	Listad III 4	Policito 4 -	Into-4-4	Saliale Dec	hases						
					Solicit Purc							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]
ſŖIJ	ISC1	[SD]	[TN]	[TX]	rum	(TVI)	[VA]	[WA]	(WV)	rwn	[WY]	[PR]

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 answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) 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	\$0
	□ Common □ Preferred		
	Convertible Securities (including warrants)	\$ <u>0</u>	\$ <u>0</u>
	Partnership Interests	\$_200,000,000	\$ <u>6,351,000</u>
	Other (Specify)	\$ <u>0</u>	\$0
	Total	\$ 200,000,000	\$ 6,351,000
	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."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	_1	\$ <u>6,351,000</u> *
	Non-accredited Investors		\$_0
	Total (for filings under Rule 504 only)	N/A	\$N/A
3.	If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , 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	\$_N/A
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	I	\$ <u>N/A</u>
	Printing and Engraving Costs	1	\$ 0
	Legal Fees		3 \$ <u>200,000</u>
	Accounting Fees		\$ <u>0</u>
	Engineering Fees		\$ <u>N/A</u>
	Sales Commissions (specify finders' fees separately)		\$ <u>N/A</u>
	Other Expenses (identify) Travel Expenses and Business Expenses		3 \$ <u>50,000</u>
	Total		\$ 250,000

	onse to Part C - Question 4.a. This difference is the					\$ <u>199,750,00</u>		
used for each of the purposes shown. If t estimate and check the box to the left of t the adjusted gross proceeds to the issuer s	d gross proceeds to the issuer used or proposed to be the amount for any purpose is not known, furnish an the estimate. The total of the payments listed must equal tet forth in response to Part C - Question 4.b above.		Off Dir Aff	nents to icers, ectors, & iliates		Payments To Others		
Salaries and fees		Ø	\$	*		\$ <u>0</u>		
Purchase of real estate		🗖	\$ <u>0</u>			\$_0		
Purchase, rental or leasing and install	ation of machinery and equipment		\$ <u>0</u>			\$_0		
Construction or leasing of plant build	lings and facilities	. 🗖	\$ <u>0</u>			\$_0		
offering that may be used in exchang	ading the value of securities involved in this e for the assets or securities of another		\$ <u>0</u>			\$_0		
Repayment of indebtedness			\$ <u>0</u>			\$_0		
Working Capital		\$ <u>0</u>			\$_0			
Other (specify): Venture Capital I	nvestments.		\$ <u>0</u>		×	\$_**		
Column Totals						\$_**		
Total Payments Listed (Column total	⊠ \$ <u>199,750,000</u>							
	D. FEDERAL SIGNATURE		<u> </u>	1 n				
following signature constitutes an underta	signed by the undersigned duly authorized person. If this naking by the issuer to furnish to the U.S. Securities and Excithe issuer to any non-accredited investor pursuant to paragraphs.	hange (Comm	ission, u	on v			
ssuer (Print or Type)	Signature		Date					
Madrona Venture Fund III-A, L.P.				February <u>9</u> , 2006				
lame of Signer (Print or Type)	Title of Signer (Print or Type)							
Troy Cichos	Authorized Signatory of Madrona III General Partner, Partner of the Issuer	LLC, tl	ne Gei	neral Part	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.)