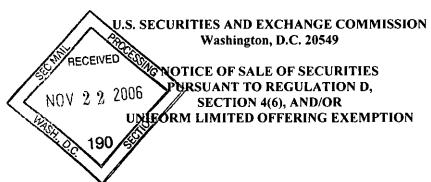
1383203

SEC 1972 (6/99) Potential persons who are to 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.



OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden hours per response... 1

	•						
Name of Offering (☐ check i	f this is an am	endment and nam	e has changed	, and indicate cl	hange.)		
	Men	bership Interes	ts in Augus	ta Apartm <u>ent</u>	s Associates L.I	C.	
Filing Under (Check box(es)	that apply):	☐ Rule 504	☐ Rule 505	☒ Rule 506	☐ Section 4(6)	D ULOF	
Type of Filing:	New Filing	☐ Amendment					
		A. B.	ASIC IDENT	TFICATION D	DATA		
I. Enter the information re	quest about th	ne issuer	**	·			
Name of Issuer (Chec	k if this is an	amendment and na	me has chang	ed, and indicate	change.)		
		August	a Apartmen	ts Associates	L.L.C.		06063543
Address of Executive Offices	(Num	ber and Street, Cit	y, State Zip C	ode)	Telephone Num	ber (Including	Area Code)
2150 N. 107	th Street, Su	iite 440, Seattle,	WA 98133			206-365-7	900
Address of Principal Busines (if different from Executive C		(Number and S	treet, City, Sta	ite Zip Code)	Telephone Num	PROCES	SED ^{de)}
						DEC 13:	2006 /
Brief Description of Business	S						
		A	acquisition o	of Real Estate	•	THOMS(FINANCI	
Type of Business Organization	on						
corporation		ed partnership, alr		I	🗷 other (please sp	ecify): Limited	Liability Company
business trust	☐ limit	ed partnership, to	be formed				
			Month Ye				
Actual or Estimated Date of			10/06	★ Actual	☐ Estimated		
Jurisdiction of Incorporation	or Organizati						
		CN for Canad	ia, FN for oth	er foreign jurisc	liction)	WA	_
GENERAL INSTRUCTIO	NS						
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 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.

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

- 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.

Sauter, Michael J. Business or Residence Address (Number and Street, City, State, Zip Code) 2150 N. 107 th Street, Suite 440, Seattle, Washington Check boxes that apply:	rector
Business or Residence Address (Number and Street, City, State, Zip Code) 2150 N. 107 th Street, Suite 440, Seattle, Washington Check boxes that apply: Promoter Beneficial Owner Executive Officer Dir Full Name (Last name first, if individual) Augusta Apartments Manager, Inc.	rector
2150 N. 107 th Street, Suite 440, Seattle, Washington Check boxes that apply: □ Promoter □ Beneficial Owner □ Executive Officer □ Dir Full Name (Last name first, if individual) Augusta Apartments Manager, Inc.	rector
Full Name (Last name first, if individual) Augusta Apartments Manager, Inc.	
Augusta Apartments Manager, Inc.	98133
	98133
Business or Residence Address (Number and Street, City, State, Zip Code)	98133
	98133
Attn: Michael J. Sauter, President 2150 N. 107th Street, Suite 440, Seattle, Washington	20100
2130 N. 107 Street, Suite 440, Stattle, Washington	
Check boxes that apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Dir	rector
Full Name (Last name first, if individual)	
Tur Name (Last name mst, if mornidal)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check boxes that apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Dir	rector
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check boxes that apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Dir	rector
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

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

				B.	INFORM	IATION A	BOUT OF	FERING				
1. Has th	e issuer sold	, or does the			non-accrec						Yes	No X
2. What i	is the minim	um investm	ent that will	be accepted	d from any i	ndividual					\$ 25,000	
3. Does t	he offering p	permit joint	ownership o	of a single u	nit?					. , ,	Yes	No
comm persoi states	the inform hission or sin to be liste list the nar or dealer, y	nilar remund d is an asso ne of the ba	eration for section for section of the section of t	olicitation of on or agent aler. If mor	of purchasers of a broker re than five	s in connect or dealer r (5) persons	ion with sal egistered w s to be liste	es of securit ith the SEC	ies in the of and/or wit	Tering, If a h a state or		
Full Nam	e (Last name	first, if ind	ividual)									
Business	or Residence	e Address (1	Number and	Street, City	, State, Zip	Code)				•		
Name of A	Associated E	Broker or De	aler							······································		
-	Which Perso (Check "All										🗆 All S	tates
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [!A] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [W!]	[HI] [MS] [OR] [WY]	(ID] [MO] [PA] [PR]
Full Nam	e (Last name	first, if ind	iviđual)			<u> </u>		""				
Business	or Residence	e Address (?	Number and	Street, City	, State, Zip	Code)						
Name of A	Associated E	Broker or De	aler									
	Which Perso (Check "All										🗆 All S	tates
(AL) (IL) (MT) (RI)	(AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] {MN} [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nam	e (Last name	first, if ind	ividual)									
Business	or Residence	e Address (?	Number and	Street, City	, State, Zip	Code)						
Name of	Associated E	Broker or De	aler				·					
	Which Perso (Check "All										🗆 Ali S	tates
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

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

_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USI	COF 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.		
		Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	□ \$ <u>-0-</u>	□ \$ <u>-0-</u>
	Equity	□ \$	□ \$ <u>-0-</u>
	□ Common □ Preferred		
	Convertible Securities (including warrants)	□\$	□ \$ <u>-0-</u>
	Partnership Interests	□\$ <u>-0-</u>	□ \$
	Other (Specify): LLC Interests	■ \$ <u>4,820,000</u>	
	TOTAL	⊠ \$ <u>4,820,000</u>	☒ \$ <u>4,820,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE	△ ⊅ <u>4,020,000</u>	△ 1 <u>4,020,000</u>
	Answer also in Appendix, Commin 5, it ming under OLOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this		
۷.	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
		Investors	of Purchases
	Accredited Investors	⊠ 60	X \$ <u>4,820,000</u>
	Non-accredited Investors	□ <u>-0-</u>	-0-
	TOTAL		□ \$
	Answer also in Appendix, Column 4, if filing under ULOE		
	TOUT OF THE STATE		
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.		
	inst sale of securities in this offering. Classify securities by type fisted in rail C - Question 1.	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		□ \$
	Regulation A		□ \$
	Rule 504.		<u> </u>
		<u> </u>	
	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		\$ 2,000
	Engineering Fees		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Filing Fees.		\$ <u>1,000</u>
	One Daponous (Idonaty) I ming I cos		φ 1,000
	TOTAL	IX	1 \$ 3.000

C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSES ANI	D USE	OF PROCEED	S
b. Enter the difference between the aggregate of furnished in response to Part C – Question 4.	fering price given in response to Part C - Ques a. This difference is the "adjusted gross proced	stion 1 a eds to th	and total expense	es \$4,817,000
amount for any purpose is not known, furnish a	the below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes show that for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments of the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above. Payment to Officers, Out O	purposes shown. If the the payments listed must		
			Officers, Directors &	Payment to Others
Salaries and fees		□\$_	-0-	. 🗆 \$0-
Purchase of real estate		□\$_	-0-	⊠ \$ <u>4,817,000</u>
Purchase, rental or leasing and installation of machine	ry and equipment	□\$_	-0-	□ \$ <u>-0-</u>
Construction or leasing of plant buildings and facilities	S.,,	□\$_	-0-	□ \$ <u>-</u> 0-
Acquisition of other businesses (including the value of be used in exchange for the assets or securities of another businesses).	f securities involved in this offering that may ther issuer pursuant to a merger)	□\$_	-0-	□ \$ <u>-0-</u>
Repayment of Indebtedness		□\$.	-0-	□ \$ <u>-0</u> -
Working capital		□\$	-0-	□ \$ <u>-0-</u>
Other (specify):				
		□ \$	-0-	0-
		□\$	-0-	⋈ \$ <u>4,817,000</u>
			•	
	D. FEDERAL SIGNATURE			
signature constitutes an undertaking by the issuer to fi	irnish to the U.S. Securities and Exchange Con	nmissic	n, upon written	ule 505, the following request of its staff, the
Issuer (Print or Type)	Signature	7		Date
Augusta Apartments Associates L.L.C.				November/ <u>7</u> , 2006
Name of signer (Print or Type)	Title of Signer (Print or Type)			•

ATTENTION

Michael J. Sauter

President of Augusta Apartments Manager, Inc., Manager of Issuer

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

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?	Yes □	No 🗷

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 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.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

			<u> </u>
Issuer (Print or Type)	Signature		Date
Augusta Apartments Associates L.L.C.			November →
Name of signer (Print or Type)	Title of Signer (Print or	Type)	
Michael J. Sauter	President of	Augusta Apartments Manager, Inc	, Manager of Issuer

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.

APPENDIX

1		2 3 4						5 Disqualification		
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	and aggregate offering price offered in state Type of investor amount purchased		hased in State		under St (if yes explan waiver	ate ULOE , attach ation of granted) -Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL	_							ļ <u>.</u>		
AK										
AZ		Х	Membership Interest in LLC \$4,820,000	6	\$455,000	-0-	N/A		х	
AR								ļ		
CA		Х	Membership Interest in LLC \$4,820,000	3	\$255,000	-0-	N/A		Х	
СО		Х	Membership Interest in LLC \$4,820,000	1	\$200,000	-0-	N/A		Х	
СТ										
DE										
DC										
FL		х	Membership Interest in LLC \$4,820,000	1	\$100,000	-0-	N/A		х	
GA		Х	Membership Interest in LLC \$4,820,000	1	\$50,000	-0-	N/A		х	
ні										
ID										
IL										
IN										
IA] "						
KS										
KY		·								
LA										
ME										
MD										
MA										
MI										
MN										
MS										
мо										

APPENDIX

1		2	3			4		Diagnal	5 ification
	to non-a investor	l 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)			under Sta (if yes explan waiver	nteation ate ULOE , attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE									
NV									
NH	s								
NJ									
NM									
NY									
NC		<u> </u>							
ND									
ОН		х	Membership Interest in LLC \$4,820,000	1	\$30,000	-0-	N/A		X
ок									
OR			<u> </u>						
PA									
RI									
SC									
SD									
TN									
TX		Х	Membership Interest in LLC \$4,820,000	1	\$60,000	-0-	N/A		Х
UT									
VT								ļ	
VA									
WA		Х	Membership Interest in LLC \$4,820,000	45	\$3,395,000	-0-	N/A	ļ	Х
WV									
WI									
WY									
PR									
CN		Х	Membership Interest in LLC \$4,820,000	ı	\$75,000	-0-	N/A		Х