1408694

UNITED STATES U.S. 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

OMB APPROVAL					
OMB Number 3235-0076					
Expires: April 30, 2008					
Estimated average burden					
hours per response:16.00					
SEC USE ONLY					
					Prefix Serial
1	1				
DATE RECEIVED					

PINNACLE 2007 PRIVATE PLACEMENT OF PREFERRED STOCK Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (Check if this is an amendment and name has changed, and indicate change.) PINNACLE BUSINESS FINANCE, INC. Address of Executive Offices (Number and Street, City, State, Zip Code) 5407 125th Street East, Suite A, Tacoma, WA 98424 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same Telephone Number (Including Area Code)
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Brief Description of Business
Commercial Finance and Leasing
Type of Business Organization Corporation Imited partnership, already formed Imited partnership, already formed Imited partnership, to be formed
□ corporation □ limited partnership, already formed □ other (please specify): TAUCESSED
business trust
Actual or Estimated Date of Incorporation or Organization: Month Year
Actual or Estimated Date of Incorporation or Organization:
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada: FN for other foreign jurisdiction) WA FINANCE:

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 reported 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 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. Executive Officer Check Box(es) that Apply: **⊠**Promoter Beneficial Owner ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Hall, Brent (Number and Street, City, State, Zip Code) **Business or Residence Address** 5407 125th Street East, Suite A, Tacoma, WA 98424 ☐ Beneficial Owner □ Director Check Box(es) that Apply: **⊠**Promoter Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Timothy E. Cetto Business or Residence Address (Number and Street, City, State, Zip Code) 5407 125th Street East, Suite A, Tacoma, WA 98424 Check Box(es) that Apply: ■ Beneficial Owner ■ Executive Officer □ Director General and/or ☐ Promoter 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: ☐ 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) ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) **Business or Residence Address**

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

					B.	INFORMA	TION ABO	UT OFFEI	RING				
						•	-				,	Yes	No
1.	Has th	ne issuer so	old, or does t	the issuer inte	nd to sell, to	o non-accred	ited investor	s in this offe	ring?				<u>X</u>
Answer also in Appendix, Column 2, if filing under ULOE.													
2. What is the minimum investment that will be accepted from any individual?							\$No Mi	inimum					
												Yes	No
3.				nt ownership	-								<u>X</u>
4.			-	sted for each	•		•	•	-	• •			
				solicitation on one of a	•								
			-	nore than five		_							
	set for	rth the info	rmation for	that broker or	dealer only	<i>'</i> .							
Full	Name	(Last name	e first, if ind	ividual)									·
						NONE -	- NOT APPI	LICABLE					
Bus	iness or	r Residence	e Address		(Number	and Street,	City, State, Z	Lip Code)					·
							·	_					
Nan	e of As	sociated Br	oker or Deal	ег									
Stat	es in Wi	hich Person	Listed Has S	Solicited or Int	ends to Soli	cit Purchaser	5						•
	(Checi	k "All State	s" or check i	ndividual Stat	es)							☐ Ali	States
-	-	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[(1)]
_	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
-	MT] Rij	[NE] [SC]	[NV] [SD]	[NH] [TN]	[UN] [TX]	[NM] [UT]	[YY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [W!]	[OR] [WY]	[PA] [PR]
			first, if ind		[]			[1,1.]					1
		(1340) 114111	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
Bus	iness or	r Residence	Address		(Number	and Street.	City, State, Z	(in Code)		,			· · · · · · · · · · · · · · · · · · ·
					(17			р,					
Nan	e of As	sociated Br	oker or Deal	ег									
State	es in Wi	hich Person	Listed Has S	Solicited or Int	ends to Soli	cit Purchasers	<u> </u>						
	(Checl	k "All State	s" or check is	ndividual Stat	es)			•		***************************************		☐ Ail	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] 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]
			first, if ind		[IX]	[01]		(1//	1 "//				
1 411	Name	(Last name	. 1115t, 11 mu	ividuar)									
		Residence	A ddmaca		(Numba	and Stroot	City, State, Z	Gr Code)					
Dus	iness of	Residence	- Address		(Number	and Street,	City, State, 2	ap Code)					
Name of Associated Broker or Dealer													
			0	•									
State	es in W	hich Person	Listed Has S	Solicited or Int	ends to Solid	cit Purchasers							
Just	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)						States						
ſ	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]
	MT] RI 1	[NE] [SC]	[NV]	[NH] [TN]	[NJ] [TX]	[NM] { IJT]	[NY] [TV]	[NC] [VA]	[ND] [WA]	[HO]	[OK]	[OR]	[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	E 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 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	\$	s
	Equity	\$4,000,000	\$4,000,000
	☐ Common ☑ Preferred	4 .(0.00,000_	<u> </u>
	Convertible Securities (including warrants)	s	s _
	Partnership Interests	s	s
	Other (Specify:)	\$	\$
	Total	\$4,000,000	\$4,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	
2.	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 offering 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	2	\$ <u>4,000,000</u>
	Non-accredited Investors		\$
	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 the securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		•
	Regulation A		\$
	Rule 504		
			\$
	Total		3 _
1.	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	X	\$ <u>1,000</u>
	Accounting Fees		s
	Engineering Fees		S
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify)		s
	Total	×	\$1,000

C. OF	FERING PRICE, NU	MBER OF INVESTORS, EXP	ENSES AND	USE OF PROCEE	S	
Question 1 and total expenses	b. Enter the difference between the aggregate offering price given in response to Part C - Question I and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." 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 set forth in response to Part C - Question 4.b above.					\$3,999,000
for each of the purposes show and check the box to the lef						
				Payments to Officers Directors, & Affiliates	,	Payments to Others
Salaries and fees				\$		\$
Purchase of real estate		••••		\$		\$
Purchase, rental or leasing and	installation of machine	ery and equipment		s		s
Construction or leasing of plan	nt buildings and facilitie	25		s		\$
Acquisition of other businesse offering that may be used in ex-	es (including the value o	of securities involved in this				
				\$		s
Repayment of indebtedness		***************************************		\$	X	\$1,000,000
Working capital		***************************************		s	X	\$2,999,000
Other (specify):				S		•
Other (speerly).	Other (specify):			Ψ		J
				s		s
Column Totals	Column Totals				X	\$3,999,000
Total Payments Listed (column		\$3,999,000				
		D. FEDERAL SIGNATUR	RE			
The issuer has duly caused this notice constitutes an undertaking by the issuissuer to any non-accredited investor p	er to furnish to the U.S. S	Securities and Exchange Commission				
Issuer (Print or Type)	Signa	ture		Date		
		57		July <u>27</u> 2007		
Pinnacle Business Finance, I		1 Swel				
Name of Signer (Print or Type)	Title o	of Signer (Print or Type)				
Brent Hall	Chie	f Executive Officer				
		ATTENTION				

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

		E. STATE SIGNATURE	-				
1.							
	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.						
3.	The undersigned issuer hereby undertakes to fi	urnish to the state administrators, upon written reques	t, 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.							
lssu	er (Print or Type)	Signature	Date				
Pin	nacle Business Finance, Inc.	July <u>27</u> 2007					
Nan	ne (Print or Type)	Title (Print or Type)					

Chief Executive Officer



Instruction:

Brent Hall

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.

[/913179/OL]

SEC 1972 (1/94)