## FÖRM 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

| OMB A                 | proval    |  |  |
|-----------------------|-----------|--|--|
| OMB Number:           | 3235-0076 |  |  |
| Expires: April 30, 20 |           |  |  |
| Estimated average bu  | rden      |  |  |
| hours per response    | 16.00     |  |  |
|                       |           |  |  |

| SEC USE ONLY  |        |  |  |  |  |
|---------------|--------|--|--|--|--|
| Prefix        | Serial |  |  |  |  |
| 1             |        |  |  |  |  |
| DATE RECEIVED |        |  |  |  |  |
|               |        |  |  |  |  |

| Name of Offering ( check if this is an amendment and name has changed, and indicate change                   | .)  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| Sale of Class A Shares   |   |  |  |  |  |  |  |
| Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506                                    | ☐ Section 4(6) ☐ ULOE   |  |  |  |  |  |  |
| ·  |   |  |  |  |  |  |  |
| Type of Filing: ☐ New Filing ☐ Amendment   | E INNIH ERZY INNIH DEZY INNIH DIERO FAHIN DIEZO FAHIN DIEZO FAHIN DIEZO |  |  |  |  |  |  |
| A. BASIC IDENTIFICATION DATA   |   |  |  |  |  |  |  |
| Enter the information requested about the issuer   |   |  |  |  |  |  |  |
| Name of Issuer ( check if this is an amendment and name has changed, and indicate changed                    | e.) 07074862  |  |  |  |  |  |  |
| LaunchCyte LLC   |   |  |  |  |  |  |  |
| Address of Executive Offices (Number and Street, City, State, Zip Code)                                      | Telephone Number (Including Area Code)                                  |  |  |  |  |  |  |
| 100 Technology Drive, Suite 400, Pittsburgh, PA 15219  | (412) 770-1630  |  |  |  |  |  |  |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code)                          | Telephone Number (Including Area Code)                                  |  |  |  |  |  |  |
| (if different from Executive Offices)  |   |  |  |  |  |  |  |
| Brief Description of Business  | » FRUCESSED   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
| Technology commercialization, focused on growing biotechnology companies.                                    | AUG 1 5 2007  |  |  |  |  |  |  |
| Type of Business Organization  |   |  |  |  |  |  |  |
| corporation limited partnership, already formed  | ☑ other (please specify) <b>THOMSON</b>                                 |  |  |  |  |  |  |
| business trust limited partnership, to be formed   | Limited Liability Control   |  |  |  |  |  |  |
| , <del></del>  | Year  |  |  |  |  |  |  |
| 1 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1  | 0 0   |  |  |  |  |  |  |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State; |   |  |  |  |  |  |  |
| CN for Canada; FN for other foreign jurisdiction)  | <u>P   A  </u>  |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |

#### 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 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

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.

## **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 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Petzinger Jr., Thomas Business or Residence Address (Number and Street, City, State, Zip Code) 100 Technology Drive, Suite 400, Pittsburgh, PA 15219 ☐ Promoter General and/or Managing Partner Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer ☒ Director Full Name (Last name first, if individual) Carryer, Barbara Bailey Business or Residence Address (Number and Street, City, State, Zip Code) 1339 N. Sheridan Avenue, Pittsburgh, PA 15206 ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Full Name (Last name first, if individual) Unkovic, Robert Business or Residence Address (Number and Street, City, State, Zip Code) BPU Investment Group Inc., 108 Main Street, Greensburg, PA 15601 ☐ General and/or Managing Partner Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ General and/or Managing Partner Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director 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 Managing Partner Check Box(es) that Apply: Promoter Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Check Box(es) that Apply: 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. INFORMATION ABOUT OFFERING  |   |                              |                              |                              |                              |                              |                              |                              |                              |                              |                              |                              |                              |            |
|--|---|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------------------------|------------|
| 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?                     |   |                              |                              |                              |                              |                              |                              |                              | Yes                          | No<br>⊠                      |                              |                              |                              |            |
| Answer also in Appendix, Column 2, if filing under ULOE  |   |                              |                              |                              |                              |                              |                              |                              |                              |                              |                              |                              |                              |            |
| 2. What is the minimum investment that will be accepted from any individual?   |   |                              |                              |                              |                              |                              |                              |                              | \$9                          | ,831*                        |                              |                              |                              |            |
|  | *An   | nount ma                     | y be modi                    | ified at the                 | issuer's o                   | liscretion.                  |                              |                              |                              |                              |                              |                              |                              |            |
| 3.   | 3. Does the offering permit joint ownership of a single unit?   |                              |                              |                              |                              |                              |                              |                              |                              | Yes<br>⊠                     | No<br>□                      |                              |                              |            |
| 4.   | 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  | l Narr  | ne (Last n                   | ame first,                   | if individ                   | ual)                         |                              |                              |                              |                              |                              |                              |                              |                              |            |
| Bus  | iness   | or Reside                    | ence Add                     | ress (Num                    | ber and S                    | reet, City                   | , State, Zi                  | p Code)                      |                              |                              |                              |                              |                              |            |
| Nar  | ne of   | Associate                    | d Broker                     | or Dealer                    | ,                            | •                            |                              |                              |                              |                              |                              |                              |                              |            |
|  |   |                              |                              | ed Has So<br>k individu      |                              |                              | Solicit Pu                   | ırchasers                    |                              |                              |                              |                              | ,,,,,                        | All States |
| [AL<br>[IL]<br>[M]<br>[RI]   | [<br>[]   | [AK]<br>[IN]<br>[NE]<br>[SC] | [AZ]<br>[IA]<br>[NV]<br>[SD] | [AR]<br>[KS]<br>[NH]<br>[TN] | [CA]<br>[KY]<br>[NJ]<br>[TX] | [CO]<br>[LA]<br>[NM]<br>[UT] | [CT]<br>[ME]<br>[NY]<br>[VT] | [DE]<br>[MD]<br>[NC]<br>[VA] | [DC]<br>[MA]<br>[ND]<br>[WA] | [FL]<br>[MI]<br>[OH]<br>[WV] | [GA]<br>[MN]<br>[OK]<br>[WI] | [HI]<br>[MS]<br>[OR]<br>[WY] | [ID]<br>[MO]<br>[PA]<br>[PR] |            |
|  |   |                              |                              | if individ                   |                              | [01]                         | [**]                         |                              | [ 1171]                      |                              | [ *** 2 ]                    | . [" ']                      | []                           |            |
| Bus  | iness   | or Reside                    | nce Addi                     | ress (Num                    | ber and St                   | reet, City,                  | State, Zip                   | Code)                        |                              |                              |                              |                              |                              |            |
| Nan  | ne of   | Associate                    | d Broker                     | or Dealer                    |                              |                              | · <u> </u>                   |                              |                              |                              | <del> </del>                 |                              |                              |            |
|  |   |                              |                              | ed Has So<br>k individu      |                              |                              |                              | ırchasers                    |                              |                              |                              |                              |                              | All States |
| [AL<br>[IL]<br>[M]<br>[RI]   | ָ<br>֖֖֖֖֖֓֞֞   | [AK]<br>[IN]<br>[NE]<br>[SC] | [AZ]<br>[IA]<br>[NV]<br>[SD] | [AR]<br>[KS]<br>[NH]<br>[TN] | [CA]<br>[KY]<br>[NJ]<br>[TX] | [CO]<br>[LA]<br>[NM]<br>[UT] | [CT]<br>[ME]<br>[NY]<br>[VT] | [DE]<br>[MD]<br>[NC]<br>[VA] | [DC]<br>[MA]<br>[ND]<br>[WA] | [FL]<br>[MI]<br>[OH]<br>[WV] | [GA]<br>[MN]<br>[OK]<br>[WI] | [HI]<br>[MS]<br>[OR]<br>[WY] | [ID]<br>[MO]<br>[PA]<br>[PR] |            |
| Full   | Nam   | e (Last na                   | ıme first,                   | if individ                   | ıal)                         |                              |                              |                              |                              |                              |                              |                              |                              |            |
| Business 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) |   |                              |                              |                              |                              |                              |                              |                              |                              |                              |                              |                              |                              |            |
| [AL]<br>[IL]<br>[MT<br>[RI]  | ]   | [AK]<br>[IN]<br>[NE]<br>[SC] | [AZ]<br>[IA]<br>[NV]<br>[SD] | [AR]<br>[KS]<br>[NH]<br>[TN] | [CA]<br>[KY]<br>[NJ]<br>[TX] | [CO]<br>[LA]<br>[NM]<br>[UT] | [CT]<br>[ME]<br>[NY]<br>[VT] | [DE]<br>[MD]<br>[NC]<br>[VA] | [DC]<br>[MA]<br>[ND]<br>[WA] | [FL]<br>[MI]<br>[OH]<br>[WV] | [GA]<br>[MN]<br>[OK]<br>[WI] | [HI]<br>[MS]<br>[OR]<br>[WY] | [ID]<br>[MO]<br>[PA]<br>[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 column below the amounts of the securities offered for exchange and already exchanged.   |                             |  |
|------|--|-----------------------------|--|
|      | Type of Security   | Aggregate Offering Price(a) | Amount Already<br>Sold(b)                  |
|      | Debt   | \$0                         | \$0  |
|      | Equity   | \$1,773,621                 | \$1,330,345                                |
|      | ☐ Common ☐ Preferred   |                             |  |
|      | Convertible Securities (including warrants)  | \$0                         | \$0  |
|      | Partnership Interests  | \$0                         | \$0  |
|      | Other (Specify)  | \$0                         | \$0  |
|      | Total  | \$1,773,621                 | \$1,330,345                                |
|      | Answer also in Appendix, Column 3, if filing under ULOE  |                             |  |
| 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 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<br>Investors         | Aggregate Dollar<br>Amount of<br>Purchases |
|      | Accredited Investors   | 2                           | \$1,330,345                                |
|      | Non-accredited Investors   | 0                           | \$0  |
|      | Total  | N/A                         | N/A  |
|      | Answer also in Appendix, Column 4, if filing under ULOE  |                             |  |
|      | 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.  | m 60 %                      | D.II. 4                                    |
|      | Type of offering   | Type of Security            | Dollar Amount Sold                         |
|      | Rule 505   | N/A                         | N/A  |
|      | Regulation A   | N/A                         | N/A  |
|      | Rule 504   | N/A                         | N/A  |
|      | 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  |                             | \$0  |
|      | Printing and Engraving Costs   |                             | \$0  |
|      | Legal Fees   | oxtimes                     | \$7,500                                    |
|      | Accounting Fees  |                             | \$0  |
|      | Engineering Fees   |                             | \$0  |
|      | Sales Commissions (Specify finder's fees separately)   |                             | \$0  |
|      | Other Expenses (identify) Filing Fees, Delivery  | $\boxtimes$                 | \$2,500                                    |
|      | Total  | oxdiv                       | \$10,000                                   |
| b.   | Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer."  |                             | \$1,763,621                                |
| 5.   | 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 in response to Part C-Question 4.b. above. |                             |  |

| •  |                                      | Payments to Officers, Directors, & Affiliates |             | Payments To Others |  |
|--|--------------------------------------|---|-------------|--------------------|--|
| Salaries and Fees  |                                      | \$0   |             | \$20,000           |  |
| Purchase of real estate  |                                      | \$0   |             | \$0                |  |
| Purchase, rental or leasing and installation of machin   | nery and equipment                   | <b>\$</b> 0                                   |             | \$0                |  |
| Construction or leasing of plant buildings and facilities  | ies 🗆                                | \$0   |             | \$0                |  |
| Acquisition of other businesses (including the value that may be used in exchange for the assets or securi merger  | ties of another issuer pursuant to a | \$0   |             | \$0                |  |
| Repayment of indebtedness  |                                      | \$0   |             | \$105,490          |  |
| Working Capital  |                                      | \$0   | $\boxtimes$ | \$409,776          |  |
| Other (specify) Investment in portfolio companies  |                                      | \$0   | ⊠           | \$1,228,355        |  |
| Column Totals  |                                      | \$0   | ☒           | \$1,763,621        |  |
| Total Payments Listed (column totals added)  |                                      | ⊠   | \$1,7       | 63,621             |  |
| D. F   | EDERAL SIGNATURE                     |   |             | -                  |  |
| The issuer has duly caused this notice to be signed by the undesignature constitutes an undertaking by the issuer to furnish to information furnished by the issuer to any non-accredited investors. | the U.S. Securities and Exchange Com | mission, upor                                 |             |                    |  |
| Issuer (Print or Type)   | Signature                            | Date<br>Augu                                  | ıst 8, 200  | 7                  |  |
| LaunchCyte LLC   |                                      | ,   |             |                    |  |
| Name of Signer (Print or Type)   | Title of Signer (Print or Type)      |   |             |                    |  |
| Thomas Petzinger Jr.   | Chief Executive Officer              |   |             |                    |  |
|  | ATTENTION                            | <del></del>                                   |             |                    |  |
| Intentional misstatements or omissions of fa   |                                      | ations. (Se                                   | e 18 U.S    | S.C. 1001.)        |  |
|  |                                      |   |             |                    |  |

END