1412094

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

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30,2008
Estimated average burden
hours per response.....16.00

SEC	SEC USE ONLY			
Prefix		Serial		
DA	TE RECEIV	ED		
	\wedge	L		

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Habit Founders, LLC	RECEIVED
Filing Under (Check box(cs) that apply):	
Type of Filing: New Filing Amendment	SEP (1)7 2007
A. BASIC IDENTIFICATION DATA	1
I. Enter the information requested about the issuer	186
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	100
Habit Founders, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1019 Chapala Street, Santa Barbara, CA 93101	(805) 965-6030
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (1976)
Brief Description of Business	SEP 1 4 2007
	THOMSON
Type of Business Organization corporation limited partnership, already formed other (p	please specify):
business trust limited partnership, to be formed limite	d liability company
Actual or Estimated Date of Incorporation or Organization: Month Year	nated

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 predictated 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. General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) REICHARD, Brent B Business or Residence Address (Number and Street, City, State, Zip Code) 1019 Chapala Street, Santa Barbara, California 93101 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) 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) General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director 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) 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)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary) 2 of 9

Г					B. 1	NFORMATI	ION ABOU	T OFFERI	NG				
1.	Uac the	icener col	d or does t	he iccuer i	stand to se	ll to non-s	ccredited i	nvectors in	this offeri	ing?		'Yes	No
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								i de	<u></u>			
2.	What is	the minim	num investn					=			3	s 4,0	00.00
2.	Wildt 13	the minn	ram mvesti	nem mat w	m be acce	pica nom e	ing marvio			A. A		Yes	No
3.			permit join										Z
4.			tion request tilar remune										
			sted is an as:										
			ame of the b , you may s							ciated pers	ons of such	1	
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Bus	siness or	Residence	Address (N	lumber and	Street, C	ity, State, Z	ip Code)			. =			
Nai	ne of As:	sociated B	roker or De	aler				·		· · ·			
Sta	tar in W/h	ich Parcor	Listed Ha	e Salicitad	or Intende	to Solicit I	Durchasars						
Sta			s" or check									[] AI	l States
	(0.1.00.1.												
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	
	IL MT	NE)	[IA] [NV]	KS NH	KY NJ	LA NM	ME NY)	MD NC	MA ND	MI OH	MN OK	MS)	MO PA
	RI	SC	SD	TN	TX	(UT)	[VT]	VA	WA	WV	WI	WY	PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
			_										
Nai	ne of As	sociated B	roker or De	aler									
Sta	tes in Wh	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers					<u> </u>	
	(Check	"All State	s" or check	individual	States)		•••••				·····	□ VI	l States
		(AV)	[47]	[AD]	CA	ĊŌ	CT	DE	DC	FL	GA	ш	ID
	AL IL	AK IN	AZ IA	AR KS	KY	LA	ME	MD	MA	MI	MN	MS)	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	\overline{WV}	WI	\overline{WY}	PR
Ful	l Name (Last name	first, if ind	ividual)									
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Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)						
Nai	ne of As	sociated B	roker or De	aler									
Sta	tes in Wh	nich Person	1 Listed Ha	s Solicited	or Intends	to Solicit l	Purchasers				· · ·		
	(Check	"All State:	s" or check	individual	States)		************		***************************************			☐ Al	l States
	AL	AK	AZ	ĀR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV)	NH	NJ	NM UT	NY	NC (VA)	ND	OH WW	OK W	OR WV	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{\mathbf{W}}$	WI	WY	PR

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 alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, chec this box and indicate in the columns below the amounts of the securities offered for exchange an already exchanged.	k	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	c 0.00	§ 0.00
	Equity	\$ 0.00	\$ 0.00
	Common Preferred	. •	. •
	Convertible Securities (including warrants)	s 0.00	0.00
	Partnership Interests		\$ 0.00
	Other (Specify limited liability company membership interests		· · · · · · · · · · · · · · · · · · ·
	Total		· •———
	Answer also in Appendix, Column 3, if filing under ULOE.	Þ	
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."	c	Aggregate
*	\$1,000 in property value and \$192,500 in value of services	Number Investors	Dollar Amount of Purchases \$ 66,000.00
	Accredited Investors		
	Non-accredited Investors		\$ 127,500.00 103,500.00
	Total (for filings under Rule 504 only)	25	\$ 193,500.00
	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 old 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 Offering	Type of Security	Dollar Amount Sold
	Type of Offering Rule 505	^	\$ 0.00
	Regulation A		\$ 0.00
	Rule 504	_	\$ 0.00
		• ————	\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insure. The information may be given as subject to future contingencies. If the amount of an expenditure in not known, furnish an estimate and check the box to the left of the estimate.	e r.	3
	Transfer Agent's Fees		s ^{0.00}
	Printing and Engraving Costs		\$_0.00
	Legal Fees	Z	\$_3,500.00
	Accounting Fees	<u> </u>	\$ 1,500.00
	Engineering Fees		\$ 0.00
	Sales Commissions (specify finders' fees separately)	_	\$ 0.00
	Other Expenses (identify)		\$ 0.00
	Total	-	\$ 5,000.00

	C. OFFERING PRICE, NUMI	Payments to Officers, Directors, & Payments to Affiliates Others \$ 0.00		
	and total expenses furnished in response to Part C -	Question 4.a. This difference is the "adjusted gross		\$
5.	each of the purposes shown. If the amount for an	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Officers, Directors, &	Others
	Salaries and fees		\$_0.00	s 0.00
	Purchase of real estate		\$_0.00_	S 0.00
	Purchase, rental or leasing and installation of mac	hinery	s_0.00	□ \$ 0.00
	Construction or leasing of plant buildings and faci	ilities	\$ 0.00	□ \$_0.00
	Acquisition of other businesses (including the value offering that may be used in exchange for the asse	ue of securities involved in this		
	Repayment of indebtedness		\$ 0.00	□ \$ 0.00
				S 0.00
	Other (specify): No cash received			s 188,500.00
			\$_0.00	□ \$_0.00
	Column Totals		\$ 188,500.00	2 \$ 188,500.00
	Total Payments Listed (column totals added)			7,000.00
		D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acci	nish to the U.S. Securities and Exchange Commiss	sion, upon writter	
SS	uer (Print or Type)	Signature	ate	
Ha	abit Founders, LLC		August 31, 2007	
۷a	me of Signer (Print or Type)	Title of Signer (Print or Type)		
re	nt B. Reichard	Manager		

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- ATTENTION -

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 230.262 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 f D (17 CFR 239.500) at such times as required by state law.	iled a no	otice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees.	ion fur	nished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entimited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer clai of this exemption has the burden of establishing that these conditions have been satisfied.		
	ter has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behathorized person.	lf by the	undersigned
Issuer (Print or Type) Signature/ Date		

Manager

END

August 31, 2007

Instruction:

, €

Habit Founders, LLC

Name (Print or Type)

Brent B. Reichard

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.