1403207

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

0 2007

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

Name of Offering (V check if this is an amendment and name has changed, and indicate change.)							
Series A Preferred Stock Financing							
Filing Under (Check box(es) that apply):	[] Rule 504	[] Rule 505	[X] Rule 506	[]Section 4(6)	[] ULOE		
Type of Filing: [] New Filing	[X] Amendment						
	A. BASIC ID	ENTIFICATION	DATA)	I III KARI OO ARI		
1. Enter the information requested abou							
Name of Issuer ([] check if this is an ame	endment and name has change	d, and indicate ch	ange.)	^7^7	CONTROL WALTER		
Grid Net, Inc. 07076712							
Address of Executive Offices	(Number and Street, City,	State, Zip Code)	Telephone Number	(Incidente			
340 Brannan Street, Suite 501, San Francisco, CA 94107 415-442-4623							
Address of Principal Business Operations	(Number and Street, City,	State, Zip Code)	Telephone Number	(Including Area Code	:)		
(if different from Executive Offices)			PROCESSE	ED			
Brief Description of Business			CED 4'A	R			
Software			SEP 1 0 2007				
Type of Business Organization							
[X] corporation	[] limited partnersh	ip, already formed	THOMSON	[] other (please spe-	cify):		
[] business trust	[] limited partnersh	ip, to be formed	FINANCIAL				
	1	Month Ye	ar				
Actual or Estimated Date of Incorporation	or Organization:	[06] [20	006]	[X] Actual	[] Estimated		
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:							
	CN for Canada	FN for foreign ju	risdiction)		[DE]		

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.

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.

Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[X] Executive Officer	[X] Director					
[] General and/or Managing Partner								
Full Name (Last name first, if individual)								
	Bell, Ray							
	Number and Street, City, State, Zip Code)							
340 Brannan Street, Suite 501, S								
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director					
	[] General and/or Managing Partner	<u> </u>						
Full Name (Last name first, if ind	ividual)							
Silverman, Mark								
	Number and Street, City, State, Zip Code)							
	San Francisco, CA 94133-4607							
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[X] Director					
	[] General and/or Managing Partner							
Full Name (Last name first, if ind	ividual)		· · · · · · · · · · · · · · · · · · ·					
Morgan, Robert								
Business or Residence Address (Number and Street, City, State, Zip Code)								
2200 Mission College Blvd., M	/S RN6-46, Santa Clara, CA 95052							
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[] Executive Officer	[] Director					
	[] General and/or Managing Partner							
Full Name (Last name first, if ind	ividual)							
Funds affiliated with Intel Corp	oration							
Business or Residence Address (N	Number and Street, City, State, Zip Code)							
2200 Mission College Blvd., M	/S RN6-46, Santa Clara, CA 95052							
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	Executive Officer	[] Director					
. , ,	[] General and/or Managing Partner							
Full Name (Last name first, if individual)								
Catamount Ventures III, L.P.	,							
Business or Residence Address (N	Number and Street, City, State, Zip Code)							
400 Pacific Avenue, 3rd Floor, San Francisco, CA 94133-4607								
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)								
,,,,,,,,								
	(1) - Link short an annual and 11/1/2011	- Cabin about an annual of						
	(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)							

					B. I	NFORM <i>A</i>	TION AI	SOUT OF	FERING						
1.	Has the issue	er sold, or o	does the is								•••••			Yes []	No [X]
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?							\$ <u>4,</u>	500.00							
3.	Does the offe	ering perm	it joint ow	nership of	a single w	nit?								Yes	No [X]
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.														
Full	l Name (Last n	ame first,	if individu	al)				·							
Bus	siness or Resid	ence Addr	ess (Numb	per and Stre	et, City, S	tate, Zip C	ode)								
Nar	ne of Associat	ed Broker	or Dealer											•	,
Stat	tes in Which P	erson Liste	ad Has Sol	icited or In	tends to S	olicit Purcl	asers		-9						
	(Check	"All State	s" or check	c individua	l States)						•••••		[]	All Sta	tes
	(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	Full Name (Last name first, if individual)														
Bus	siness or Resid	ence Addr	ess (Numb	er and Stre	et, City, S	tate, Zip C	ode)								
Nar	ne of Associat	ed Broker	or Dealer												
Stat	tes in Which P	erson Liste	xd Has Sol	icited or In	tends to S	olicit Purch	nasers			•					
	(Check	"All State:	s" or check	c individua	l States)					*************		•••••	[]	All Stat	les
Full	[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 Name (Last name first, if individual)															
Business or Residence Address (Number and Street, City, State, Zip Code)															
Nar	ne of Associat	ed Broker	or Dealer												
Stat	tes in Which Pe	erson Liste	d Has Sol	icited or In	tends to S	olicit Purch	nasers								
(Check "All States" or check individual States) [] All States							es								
	[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 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 [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt Equity 6.750,000,00 6,736,502.25 [] Common [X] Preferred Convertible Securities (including warrants)..... Partnership Interests Other (Convertible Promissory Notes)..... Total 6,750,000.00 6.736,502,25 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." Aggregate Dollar Amount Number Investors of Purchases Accredited Investors.... 6,736,502.25 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 securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Security Type of Dollar Amount Security Sold Rule 505 Regulation A Rule 504 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... Legal Fees[X] 30,000

Total[X]

30,000.00

	C. OFFERING PRICE, NUMBER OF INVES	TORS, EXPENS	SES AND USE OF PROCEE	DS
	 b. Enter the difference between the aggregate offering price given in re-Question 1 and total expenses furnished in response to Part C - Question 1 and total expenses proceeds to the issuer." 	estion 4.a. This		\$6,729,000.00
5.	Indicate below the amount of the adjusted gross proceeds to the proposed to be used for each of the purposes shown. If the amount for not known, furnish an estimate and check the box to the left of the est of the payments listed must equal the adjusted gross proceeds to the response to Part C – Question 4.b above.	or any purpose is timate. The total	Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees	[]	\$[]	\$
	Research and Development	[]	\$[]	\$
	Purchase, rental or leasing and installation of machinery and equipment	[]	\$[]	\$
	Construction or leasing of plant buildings and facilities	[]	\$[]	\$
	Acquisition of other businesses (including the value of securities offering that may be used in exchange for the assets of securissuer pursuant to a merger)	rities of another	\$[]	\$
	Repayment of indebtedness	[]	\$[]	\$1,029,369.60
	Working capital and general corporate purposes	[]	\$[X]	\$5,720,630.40
	Other (specify):	[]	[]	\$
	Column totals	[]	\$[]	\$
	Total payments listed (column totals added)		[X] \$ <u>[6,720,000.0</u>	<u>0</u>]
	D. FEDERAL	SIGNATURE		
constitut	er has duly caused this notice to be signed by the undersigned duly authors an undertaking by the issuer to furnish to the U.S. Securities and Exchange to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502	ange Commission,		
Grid No	·	Signature	Rell	Date August 13, 2007
Name of Ray Bel	Signer (Print or Type)	Title of Signer President	int or Type)	

END

A	tton	tion

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