243631 FORM D **UNITED STATES OMB** Approval OMB Number: 3235-0076 SECURITIES AND EXCHANGE COMMISSION Expires: April 30, 2008 Washington, D.C. 20549 Estimated average burden RECEIVED FORM D hours per response16.00 NOTICE OF SALE OF SECURITIES SEC USE ONLY Serial PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION DATE RECEIVED Name of Offering check if this is an amendment and name has changed, and indicate change.) Filing Under (Check box(es) that apply): ☐ Rule 504 **⊠** Rule 506 ☐ Section 4(6) □ ULOE ☐ Rule 505 Type of Filing: ■ New Filing 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.) Tower East Maverick Fund, L.L.C. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Numb 20820 Chagrin Blvd., Suite 300, Shaker Heights, OH 44122 216/491-3990 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 Investment Fund Type of Business Organization corporation limited partnership, already formed other (please specify) business trust limited partnership, to be formed limited liab. company THO Month Year Actual or Estimated Date of Incorporation or Organization: 0 6 9 7 Ø Estimated Actual

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).

CN for Canada; FN for other foreign jurisdiction)

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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

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State;

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.

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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. ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Terence C. Sullivan Business or Residence Address (Number and Street, City, State, Zip Code) 20820 Chagrin Blvd., Suite 300, Shaker Heights, OH 44122 ☐ Director General Partner or ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: Promoter Managing Member Full Name (Last name first, if individual) Falmouth Investment Company, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 20820 Chagrin Blvd., Suite 300, Shaker Heights, OH 44122 ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer ☐ Director General and/or Promoter ☐ Beneficial Owner Check Box(es) that Apply: 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 Check Box(es) that Apply: Promoter General and/or 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)

☐ Beneficial Owner ☐ Executive Officer

☐ Director

General and/or

Managing Partner

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING														
Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								Yes	No					
2.										\$ 60,000				
3.	*(Subject to Issuer's discretion to accept lesser investments)										Yes ⊠	No		
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. None													
Full Name (Last name first, if individual)														
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
	es in Whi						nds to S	Solicit I	Purchas	ers			All States	
[A	L] [Al	() [A	<u>.</u>] [AR	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]		
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	Name (L		 -			[41]	[47]	[447]	[***]	[441]	[**1]	[F IV]		
Busi	iness or R	esiden	e Addr	ess (Nun	nber and	l Street	, City,	State, Z	ip Cod	e)				-
Nan	ne of Asso	ciated	Broker	or Deale	r									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)								All States						
[A	L] [A	() [AZ	() [AR	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[[[]]		
[11]			-		[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[M	•	•	-		[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[R					[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Name (Last name first, if individual)														
Busi	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)														
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[M	T} [NE	[N\) [NH	[NJ]	[NM]	[NY]	[NC]	[ND]	{OH}	[OK]	[OR]	[PA]		
IR	11 (SC	i ist) ITN	ΠХІ	ณฑ	IVTI	IVAI	IWAI	IWV1	(WII	IWY1	(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	Ar	nount Already Sold
	Debt	\$_	0	\$	0
	Equity	\$_	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests	\$	0	\$	0
	Other (specify) limited liability company membership units	\$	48,000,000	\$	43,493,170
	Total	\$	48,000,000		43,493,170
	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 Investors		Aggregate ollar Amount of Purchases
	Accredited Investors		101	\$ <u>4</u>	3,493,170
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	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 offering				
			Type of	D	ollar Amount
	D. I. sos		Security	•	Sold
	Rule 505	-	N/A	\$	0
	Regulation A	_	N/A	3	0
	Rule 504		N/A	\$	0
	Total		N/A	3	0
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		\boxtimes	\$	4,000
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (Specify finder's fees separately)			\$	
	Other Expenses (identify)			\$_	
	Total		×	\$	4,000

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	C. OFFERING PRICE, N	UNIBER OF INVESTORS, EXP	MOES AN	D USE OF PROCEE	D3			
	b. Enter the difference between the aggregate of 1 and total expenses furnished in response to Pargross proceeds to the issuer."	996,000						
5.	Indicate below the amount of the adjusted gross for each of the purposes shown. If the amount and check the box to the left of the estimate, adjusted gross proceeds to the issuer set forth in a	for any purpose is not known, furnish The total of the payments listed mus	an estimate it equal the					
				Payments to Officers, Directors, & Affiliates	Payments To Others			
	Salaries and fees			\$ <u> </u>	\$ 0			
	Purchase of real estate			\$ <u> </u>	\$0			
	Purchase, rental or leasing and installation of	machinery and equipment		\$ <u> </u>	\$0			
	Construction or leasing of plant buildings and	d facilities		\$ <u> </u>	\$0			
	Acquisition of other businesses (including the offering that may be used in exchange for the pursuant to a merger)	assets or securities of another issuer		\$ 0 □	\$ 0			
	Repayment of indebtedness			\$ 0 D	s 0			
	Working capital (to be called as needed)			\$ 0 D	\$ 0			
	Other (specify) Purchase of investments		لجبا	<u> </u>	<u> </u>			
				\$ <u> </u>	\$47,996,000			
	Column Totals Total Payments Listed (column totals added)			s <u> </u>	\$ <u>47,996,000</u> 47,996,000			
		D. FEDERAL SIGNATUR	E					
sig	e issuer has duly caused this notice to be signed mature constitutes an undertaking by the issuer to formation furnished by the issuer to any non-accre-	to furnish to the U.S. Securities and E	Exchange Co	ommission, upon written	Rule 505, the following request of its staff, the			
lss	uer (Print or Type)	Signature	0	Date				
То	wer East Maverick Fund, L.L.C.	e W	<u>لنــــــــــــــــــــــــــــــــــــ</u>	3(6/2007				
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)						
Te	rence C. Sullivan	President of Falmouth Investment Company, Inc., Manager Member						
		ATTENTION						
		/11 I = (111V)1						

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?										
	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 law.										
3.	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 persons.											
Issu	ner (Print or Type)	Signature	001	Date							
Tov	ver East Maverick Fund, L.L.C.	1	Llh	8/5/2007							
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)									
Ter	ence C. Sullivan	President of Falmouth Investment Company, Inc., Manager Member									

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.

