FORM D

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

FORM D

OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response.....16.00

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

SEC USE ONLY							
Prefix	Serial						
DATE RECEIVED							
	1						

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Series A Preferred Stock of CrossLoop, Inc. and underlying Common Stock issuable on con	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
Type of Pining. 2 New Pining [] Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	08057116
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
CrossLoop, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
380 Foam Street, Suite 210, Monterey, CA 93940	(831) 333-0284
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Computer screen sharing utility service provider	DDOCESSED
	PROCESSED
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	please specify): AUG 082008
Month Year	THOMSON REUTERS
	mated
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D (77d(6)).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b 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. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only reporthereto, the information requested in Part C, and any material changes from the information previously support 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 s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fo accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall

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 RASIC IDE	NTII	FICATION DATA				
2. Enter the information re	equested for the fol	lowing		214 1 11	FICATION DATA				
	•	_	s been organized w	ithin (the nast five years:				
•	·		-		- ·	of 10	% or more a	afa elas	ss of equity securities of the issuer
					rate general and mar				
	managing partner o			corpo	rate general and mar	ia Biri B	partners o	, partin	eramp coders, and
- Lucii general and i									
Check Box(es) that Apply:	Promoter	7	Beneficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, Lorenzen, Lee J.	if individual)				· · ·		_	_	
Business or Residence Address 380 Foam Street, Suite 2				ode)		•			
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner	Z	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Rolander, Thomas A.									
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)					
380 Foam Street, Suite 2	10, Monterey, C	A 9394	40		_				
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, Lorenzen, Matthew	if individual)								
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)					
380 Foam Street, Suite 2	10, Monterey, C	A 939	40						
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
El Dorado Ventures VII, L	P.								
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)	•				
2440 Sand Hill Road, Su	uite 200, Menlo P	ark, C	A 94025						
Check Box(es) that Apply:	Promoter	7	Beneficial Owner	Ø	Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, Alderson, Lisa	if individual)								
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)					
380 Foam Street, Suite 2	210, Monterey, C	A 939	40						
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, Peterson, Thomas	if individual)					····			
Business or Residence Addre 380 Foam Street, Suite 2			City, State, Zip Co	de)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first	if individual)								·

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

Haddad, Andre

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

380 Foam Street, Suite 210, Monterey, CA 93940

		-			B. 1	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	e issuer sol	d, or does t	he issuer i	ntend to se	ll. to non-a	ccredited i	investors in	n this offer	ing?		Yes	No ™
-			_,			Appendix						_	_
2.	What is	s the minin	num investn	nent that v	vill be acce	pted from	any individ	lua!?				\$ <u>0.0</u>	0
,	Dogodk	offoring	permit join	• a.v.n.anshi	in of a sinc	da umit?						Yes	No
3. 4.			permit join tion reques										
	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	li Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)		,				
Na	me of As	sociated B	roker or De	aler						_			
Sta	tes in Wi	hich Person	n Listed Ha	Solicited	or Intends	to Solicit	Purchasers	·		. <u>. </u>	· · ·		
	(Check	"All State	s" or check	individua	States)	***************************************	•••••					□ Al	l States
	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	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)				· · · · · · · · · · · · · · · · · · ·	<u>.</u>	
Na	me of As	sociated B	roker or De	aler						· · · · · · · · · · · · · · · · · · ·	,		
Sta			Listed Has										
	(Check	"All State:	s" or check	individual	States)	***************************************						☐ Al	States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)				···-					-
Bus	siness or	Residence	Address (1	Number an	d Street, C	city, State, 2	Zip Code)	. "		· m			
Nai	me of As	sociated Br	roker or De	aler									
Sta	tes in Wh	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	•••••		······	************			☐ Al	States
	AL IL MT	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

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 the 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			\$
	Equity			
	Common 🔽 Preferred	<u> </u>	-	*
	Convertible Securities (including warrants)	2		c
	Partnership Interests			\$
	Other (Specify Convertible debt			\$ 650,146.48
	Total	3.549.616.91		
)	-	\$_0,040,010.24
	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
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	<u> </u>	-	\$_3,549,619.24
	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		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505			\$
	Regulation A	<u>. </u>		2
	Rule 504			\$
	Total			\$_0.00
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 insurer. 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]	\$ 10,000.00
	Accounting Fees	_		s
	Engineering Fees	-	•	<u> </u>
	Sales Commissions (specify finders' fees separately)	_	1	<u> </u>
	Other Expenses (identify)	_	1	<u></u>
	Total		, ' 1	10.000.00

	C. OFFERING PRICE, NOW	IBER OF INVESTORS, EAFENSES AND USE OF	INCCEEDS	
	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C—proceeds to the issuer."		S	\$\$
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gros	d	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		□ \$	□\$
	Purchase of real estate		_	_
	Purchase, rental or leasing and installation of ma		ш*	- U *
	and equipment		s	\$
	Construction or leasing of plant buildings and fac	cilities	s	
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass issuer pursuant to a merger)	sets or securities of another		. T. €
	Repayment of indebtedness			_
	Working capital		_	
	Other (specify):		∐ 3	. LJ
			s	. 🗆 \$
	Column Totals		_ \$_0.00	2 \$ 3,539,616.9
	Total Payments Listed (column totals added)		_	539,616.91
		D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Commi	ssion, upon writte	
SSI	uer (Print or Type)	Signature	Date	
	ossLoop, Inc.	1 /m 1) - (un	July 31, 2008	
lai	me of Signer (Print or Type)	Title of Signer (Print or Type)		
lar	k P. Tanoury	Secretary		
	<u> </u>	•		

- 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 K

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 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 person.

Issuer (Print or Type)	Signature	Date
CrossLoop, Inc.	Ifm V? hu	July 31, 2008
Name (Print or Type)	Title (Print or Type)	
Mark P. Tanoury	Secretary	

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.

APPENDIX 5 2 4 3 Disqualification under State ULOE Type of security Intend to sell (if yes, attach and aggregate to non-accredited offering price Type of investor and explanation of amount purchased in State investors in State offered in state waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited Investors **Investors** Amount Yes No State Yes No Amount AL AK AZAR CA Series A Preferred 10 \$3,502,947. 0 \$0.00 × X Stock CO CT DE DC FL GA HI ID IL IN IA KS ΚY LA ME MD MA ΜI MN MS

APPENDIX 5 2 3 4 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate to non-accredited offering price Type of investor and explanation of amount purchased in State investors in State offered in state waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited No Yes No Investors **Investors** Amount Yes State Amount MO MT NE NVNH NJ NM Series A Preferred \$36,671.85 \$0.00 X NY X Stock NC ND OH OK OR PA RI SC SD TN TX UT VTVA WA WVWI

	APPENDIX															
t		2	3	4 Disqu				3			4					
!			Type of security													
		to sell ccredited	and aggregate		T of i											
		s in State	offering price offered in state	Type of investor and amount purchased in State					ation of granted)							
	(Part B	-Item 1)	(Part C-Item 1)		(Part C-Item 2)				-Item 1)							
				Number of Number of Accredited Non-Accredited												
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No							
WY			1													
PR																

