# FORM D

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

# **FORM D**

SEC Mail Processing Section

SEB 0 9 8008

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

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OMB APPR	OVAL
OMB Number:	3235-0076
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Name of Offering Wincheck if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	PROCESSED
A. BASIC IDENTIFICATION DATA	SEP 1 2 2008
1. Enter the information requested about the issuer	1
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Primitive Film Partners LP	THOMSON REUTERS
Address of Evecutive Offices Olympher and Street City State Zin Code)	Telephone Number (Including Area Code)
2126 N. Evergreen St. Burbank, CA 91505	805-709-3556
2126 N. Evergreen St. Burbank, CA 91505  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	
Financing, Production, Postproduction and marketing of motion picture c	urrently entitled Primitive.
Type of Business Organization	
	ease specify
business trust   limited partnership, to be formed	1 / 1   1   1   1   1   1   1   1   1
Month Year  Actual or Estimated Date of Incorporation or Organization: 07 3	ated IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
Jurisdiction of Incorporation or Organization: (Enter two-letter II.S. Postal Service abbreviation for State:	

### 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)

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.

2.	E	nter t	he info	rmation	requ	ested for t	he fol	lowing:							
	•	E	ach pro	moter o	f the	issuer, if	the iss	uer has been o	rganized w	ithin t	the past five years;				
	•	E	ach bei	neficial o	wne	r having th	e pow	er to vote or dis	pose, or di	rect th	e vote or disposition	of, 10	% or more o	f a clas	s of equity securities of the issuer.
	•	E	ach exe	ecutive o	ffice	er and direc	ctor of	f corporate issu	ers and of	согро	rate general and ma	naging	g partners of	partne	rship issuers; and
	•	Ea	ach gei	neral and	l ma	naging par	tner o	f partnership is	suers.						
Che	ck	Box(e	es) tha	t Apply:		Promo	oter	Benefici	al Owner		Executive Officer		Director	Ø	General and/or Managing Partner
Full	Na	ıme (	Last na	me first	, if i	ndividual)									
-	Ti.	١.	دمان	J E	10	ta:	À	116							
Busi	i_n	SS OF	Reside	nce Add	ress	(Number	rand	LLC Street, City, St	ate, Zip Co	ode)					
											91505				
Chec	ck	Box(e	s) tha	t Apply:	ا	Promo	oter	Benefici	al Owner	ď	91505 Executive Officer	Ø	Director		General and/or Managing Partner
Full	Na	me (	Last na	ıme first	, if i	ndividual)									
	C	oofé	-	Ben	,د)	min	le	<b>C</b> Street, City, St							
_ 2	1	26	<i>N</i> .	Ever	ๆห	en 5	5+.	Benefici	<u> اد د</u>	<u>A</u>	91505		,		
Chec	ck	Box(e	es) tha	t Apply:	, 	Promo	ter	Benefici	al Owner		Executive Officer		Director		General and/or Managing Partner
Full	Na	me (l	Last na	me first,	, if i	ndividual)									
Busi	ne	SS OT	Reside	nce Add	ress	(Number	r and	Street, City, St	ate, Zip Co	ode)					
Chec	ck :	Box(e	s) tha	t Apply:	l	Promo	oter	Benefici	al Owner		Executive Officer		Director		General and/or Managing Partner
Full	Na	me (l	Last na	ıme first,	, if i	ndividual)									
Busi	ne	ss or	Reside	nce Add	ress	(Number	r and	Street, City, St	ate, Zip Co	de)	<del>,</del>				
Chec	ck :	Box(e	s) that	Apply:	]	Promo	ter	☐ Benefici	al Owner		Executive Officer		Director		General and/or Managing Partner
Full	Na	me (l	Last na	me first,	, if i	ndividual)		·					· · · · · · · · · · · · · · · · · · ·		
Busi	nes	ss or l	Reside	nce Add	ress	(Number	r and	Street, City, St	ate, Zip Co	de)					
Chec	ek i	Box(c	s) that	Apply:	ſ	Promo	ter	Benefici	al Owner		Executive Officer		Director		General and/or Managing Partner
Full	Na	me (l	Last na	me first,	, if i	ndividual)									
Busi	nes	ss or l	Reside	nce Add	ıcss	(Number	r and	Street, City, St	ate, Zip Co	de)		<u>.</u>			
Chec	ek l	Box(e	s) that	Apply:	[	Promo	ter	Benefici	al Owner		Executive Officer		Director		General and/or Managing Partner
Full	Na	me (I	ast na	me first,	, if i	ndividual)				<del></del>					
Busi	nes	s or	Reside	nce Add	ress	(Number	r and :	Street, City, Sta	ate, Zip Co	de)					
						(Us	se blar	nk sheet, or con	y and use	additio	onal copies of this s	heet a	as necessary	<del></del>	

A. BASIC IDENTIFICATION DATA

				·	В. Г	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sol	d, or does t	ne issuer i	ntend to se	ll, to non-a	ccredited i	nvestors ir	this offer	ing?	•••••	Yes	No
				Ans	wer also ir	Appendix	, Column 2	2, if filing	under ULC	E.			
2.	What is	the minin	num investn	nent that w	vill be acce	pted from	any individ	lual?	•••••••			<u>s_1,5</u>	500.00
3.	Does th	e offering	permit join	t ownershi	ip of a sing	le unit?						Yes	No I
4.			tion request										
	If a pers	son to be lis s, list the n	nilar remune sted is an ass ame of the b , you may s	sociated pe roker or de	erson or age caler. If me	ent of a brol ore than fiv	cer or deale e (5) persoi	r registere ns to be list	d with the S ted are asso	EC and/or	with a state	8	
Ful	l Name (	Last name	first, if ind		N/A						•		
Bus	siness or	Residence	Address (N			ity, State, 2	Lip Code)			-			
Naı	me of As:	sociated B	roker or De	aler									
Sta	tes in Wh	nich Persor	n Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)					*****************		☐ Al	l States
	AL	[AK]	AZ	AR	CA	CO	CT	DE	DC)	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND) WA	OH WV	OK WI	OR WY	PA PR
					(44)		اختا	(*/1.)	(1774)		**1	(4.7)	
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Naı	ne of As:	sociated B	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	l States
	AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	<u>N</u>	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful			first, if indi			<u> </u>	سند	VA					
	i rvaine (	Dast Hatte	mst, n mu	· viduai)									
Bus	iness or	Residence	Address (1	lumber an	d Street, C	ity, State, 2	Zip Code)						
Nar	ne of Ass	sociated Bi	roker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				· · · · ·		
	(Check	"All States	s" or check	individual	States)	····	•••••	•••••••				All	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	(ID)
		IN	IA	KS	KY	LA	ME	MD	MÄ	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY) VT	NC VA	ND WA	OH W∇	OK WI	OR WY	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.				. 43 1
	Type of Security	Aggregate Offering Price		An	Sold
	Debt			\$	
	Equity				
	Common Preferred				
	Convertible Securities (including warrants)			<b>s</b>	
	Partnership Interests	50,000		\$	6,500
	Other (Specify)	•			•
	Total				
	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 f Purchases
	Accredited Investors			•	I I dichases
	Non-accredited Investors		_	•_	
	Total (for filings under Rule 504 only)			\$_ \$	6,500
	Answer also in Appendix, Column 4, if filing under ULOE.		_	Φ	0,500
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 Security		D	ollar Amount Sold
	Rule 505			\$	0
	Regulation A			\$_	0
	Rule 504		_	\$_	0
	Total		_	\$_	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 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			<b>\$</b>	D
	Printing and Engraving Costs	***********		<b>\$</b>	0
	Legal Fees			\$	0
	Accounting Fees			\$	0
	Engineering Fees			\$	¢
	Sales Commissions (specify finders' fees separately)	•		\$	0
	Other Expenses (identify)			\$	0
	Total		$\overline{\Box}$	\$	0

	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — C proceeds to the issuer."	Question 4.a. Th	nis differ	ence is the "	adjusted gros	\$		\$ 50	0,000
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part 6	purpose is not the payments lis	t known sted mus	, furnish an t equal the s	estimate and	i			
						Di	yments to Officers, rectors, & ffiliates	P	ayments to Others
	Salaries and fees			•••••		<b>\$</b> _	7,000	_ <b>₫\$</b> _	24,969
	Purchase of real estate	•••••••				<b>S</b> _	Ø	_ <b>□\$</b> _	
	Purchase, rental or leasing and installation of mach and equipment	inery				<b>□</b> \$_	0	<b></b>	9,230
	Construction or leasing of plant buildings and facil								•
	Acquisition of other businesses (including the valuoffering that may be used in exchange for the asset issuer pursuant to a merger)	s or securities (	of anoth	ег		—— ☐ \$	0	— □\$	0
	Repayment of indebtedness					_		_	
	Working capital					_			•
	Other (specify): contingencies					_			
	(7-1-7)		<del></del>			_+ <u>-</u>		. ت	<del></del>
					******	<b>_\$</b> _	c	. 🗆 \$_	0
	Column Totals					<b>_\$</b> _	7,100	<b>I</b>	42,900
	Total Payments Listed (column totals added)	•••••••			••••••		□\$ <u>_</u> \$	50, 00	00
		D. FEDERA	L SIGN	ATURE					
ig	e issuer has duly caused this notice to be signed by the unature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accre	ish to the U.S.	Securiti	es and Excl	iange Commi	ssion,	upon writte		
_	ier (Print or Type) imitive Film Partners LP	Signature	6	Mn_		Date o	8/26,	1200	· 8
		Title of Signer	(Print o	or Type)			<u> </u>		
_		Manager,	•		Entertain	ــ م عدة ينا	+ LLC		
	·	J ,							

- ATTENTION

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

		E. STATE SIGNATURE			
1.	· · · · · · · · · · · · · · · · · · ·	62 presently subject to any of the disquali		Yes	No
		See Appendix, Column 5, for state respo	nse.		
2.	The undersigned issuer hereby undertake D (17 CFR 239.500) at such times as re	es to furnish to any state administrator of an quired by state law.	y state in which this notice is	filed a no	tice on Form
3.	The undersigned issuer hereby undertak issuer to offerees.	es to furnish to the state administrators, u	pon written request, informa	tion furn	ished by the
4.	limited Offering Exemption (ULOE) of t	he issuer is familiar with the conditions the state in which this notice is filed and unablishing that these conditions have been s	nderstands that the issuer cla		
	er has read this notification and knows the thorized person.	contents to be true and has duly caused this	notice to be signed on its beha	alf by the	undersigned
	Print or Type)	Signature /	Date		
Primi	live Film Partners LP	Denomin lapon	08/26/2	2008	
	Print or Type)	Title (Print or Type)			
Den	amin Lee Cooper	Manager Thunderhead	Entertainment 1	LLC	

# 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.

				AP	PENDIX		·			
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State  (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited				No	
AL										
AK		<b></b>								
AZ	· · · · · · · · · · · · · · · · · · ·					***				
AR										
CA	V		Partnership interests \$50,000			2	\$6,500			
СО										
СТ										
DE							<u>.</u>			
DC		W-1-1								
FL		····					<del></del>			
GA		<u> </u>			M-/4-4					
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MA										
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MN										
MS										

# **APPENDIX** 2 1 3 4 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Investors Yes No Amount Amount MO MT NE NVNH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA wv WI

				APP	ENDIX						
1		2	3		4						
	to non-a	to sell accredited as in State a-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		under State ULOI (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											

