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FORM D	, UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549	OMB APPROVAL OMB Number: 3235-0076 Expires: July 31.2008
	FORM D	Estimated average burden hours per response16.00
	NOTICE OF SALE OF SECURITIE	S SEC USE ONLY Prefix Serial
	PURSUANT TO REGULATION D,	
09037460	SECTION 4(6), AND/OR	DATE RECEIVED
	UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering ( check if the check i	his is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that an Type of Filing:	pply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requeste	d about the issuer	
Name of Issuer ( check if this	is an amendment and name has changed, and indicate change.)	
Touchdown Mortgage Fund L.F		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
	ite 201, Anaheim Hills, CA 92807	(714) 998-2290
Address of Principal Business Oper (if different from Executive Offices		Telephone Number (Including Area Code)
Brief Description of Business	· · · · · · · · · · · · · · · · · · ·	
Investment in securities		Mail Processing Section
Type of Business Organization	The limit of a set a set in a local to form of	blease specify):
corporation business trust	limited partnership, to be formed	MAR 13 2001
Actual or Estimated Date of Incorpo Jurisdiction of Incorporation or Org	Month Year pration or Organization: 014 96 Actual Estir panization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	MAR 1 3 2009 mated Washington, DC CIA 105
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.

SEC 1972 (6-02)

Persons who 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.

		A. BASIC ID	ENTIFICATION DATA	N S A S	
2. Enter the information re	quested for the fol	lowing:			
1 1	,	suer has been organized w			
					a class of equity securities of the issuer.
• Each executive off	icer and director of	f corporate issuers and of	corporate general and mar	aging partners of	partnership issuers; and
<ul> <li>Each general and n</li> </ul>	nanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Tellone Management Gro					
Business or Residence Addre 6200 E. Canyon Rim Roa	`				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Dean C. Tellone					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
6200 E. Canyon Rim Roa	id, Suite 201, Ar	aheim Hills, CA 9280	)7		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Touchdown Inc.	f individual)				
Business or Residence Addre 6200 E Canyon Rim Rd S	•	Street, City, State, Zip Co eim Hills, CA 92807	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	· · · · · · · · · · · · · · · · · · ·			
Vincent Ferragamo					
Business or Residence Addre 6200 E Canyon Rim Rd		Street, City, State, Zip Coneim Hills, CA 92807	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
	(Use bla	nk sheet, or copy and use	additional copies of this s	heet, as necessary	)

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					• B. I	NFORMAT	ION ABOU	T OFFERI	NG				
1 1	T	·11				ll, to non-a	corodited i	nvoetore in	this offeri	in a?		Yes	No
1. H	las the	issuer sold	, or does tr									×	
2 11	Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?*				<sub>s</sub> 10,	00.00							
2. V	vilat 15					General P						Yes	No
3. E	oes th					le unit?						R	
4. E	Inter th	e informati	on request	ed for eac	h person v	vho has bee	en or will t	e paid or	given, dire	ctly or ind	irectly, any		
c It	ommis fa pers	sion or simi on to be list	lar remune	ration for s	olicitation	of purchase of a brok	ers in conne er or deale	ection with r registered	sales of sec with the S	curities in t EC and/or	he offering. with a state		
0	r states	, list the na	me of the b	roker or de	ealer. If mo	ore than five	e (5) persor	ns to be list	ed are asso	ciated pers	ons of such		
					e informati	on for that	broker or	dealer only					
Full N	lame (I	Last name f	irst, if indi	vidual)									
Busin	ess or	Residence	Address (N	umber and	l Street, C	ity, State, Z	Cip Code)						
Name	of Ass	ociated Bro	oker or Dea	aler				_,			<del></del>		
				<u> </u>			D 1						
						to Solicit							l States
(	Спеск	All States	or check	maividuai	States)		•••••••	••••••	•••••	•••••			i states
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		IN	IA NV	KS	KY NJ	LA NM	ME NY	MD NC	MA ND	MI	MN OK	MS OR	MO PA
	MT RI	NE SC	SD	NH TN	TX	UT		VA	WA	WV	WI	WY	PR
Full N	lame (l	Last name f	ïrst, if indi	vidual)									
Busin	ess or	Residence	Address ()	Jumber an	d Street, C	City, State, 2	Zip Code)						
2 40111	••••				,		1 ,						
Name	of Ass	ociated Bro	oker or Dea	aler									
States	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
												🖂 Al	l States
_	AL	AK	AZ	AR	CA	CO	CT	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full N	Jame ()	Last name f	irst if indi	vidual)									
i un r	anne (i	Sast name 1	mot, n mai	vidual)									
Busin	ess or	Residence	Address (N	lumber an	d Street, C	tity, State, 2	Zip Code)						
Name	of Ass	ociated Bro	oker or Dea	aler									
States	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				<b>_</b>		
(	Check	"All States	" or check	individual	States)						•••••	🗌 Al	l States
Г	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	NE	NV	NH	NJ	NM	NY	NC	ND WA	OH WV	OK WI	OR WY	PA PR
L	RI	SC	SD	TN	TX	UT	VT	VA	WY AL	VV V	VV L	1 11	

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(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

 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	\$ 0.00	\$ 0.00
Equity	\$ 0.00	\$ <u>0.00</u>
Convertible Securities (including warrants)		0.00 \$
Partnership Interests	\$ Indefinite	\$ 23,278,665.00
Other (Specify)		\$_0.00
Total	<u>\$_</u> Indefinite	\$ <u>23,278,665.00</u>

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 Dollar Amount of Purchases
Accredited Investors	88	\$ <u>17,389,729.00</u>
Non-accredited Investors	79	\$_5,888,936.00
Total (for filings under Rule 504 only)		\$
Answer also in Annondiv. Column 4 if filing under ULOF		

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 Security	Dollar Amount Sold
Rule 505	None	\$ 0.00
Regulation A	None	\$ 0.00
Rule 504	N I a trans	\$ 0.00
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	\$ 1,000.00
	\$ 4,000.00
Legal Fees	<b>y</b> \$ 2,000.00
Accounting Fees	V <u>\$_2,000.00</u>
Engineering Fees	<b>§</b>
Sales Commissions (specify finders' fees separately)	<b></b> \$
Other Expenses (identify) Blue Sky filing fees	✓ \$ 150.00
Total	
10(a)	

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

\$ N/A

b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.

	Payments to Officers, Directors, &	Payments to
	Affiliates	Others
Salaries and fees	[] \$	\$
Purchase of real estate	[] \$	\$
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 involved in this offering that may be used in exchange for the assets or securities of another		
issuer pursuant to a merger)		
Repayment of indebtedness		
Working capital	[] \$	_ [] \$
Other (specify): All of the adjusted gross proceeds to the issuer is allocated to portfolio	\$	\$
investment in securities.		
	\$	\$
Column Totals	<u>\$ 0.00</u>	\$
Total Payments Listed (column totals added)	\$	
D. FEDERAL SIGNATURE		

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature
Touchdown Mortgage Fund L.P.	03/12/09
Name of Signer (Print or Type)	Title of Signer (Print or Type)
Vincent Ferragamo	President of Touchdown Inc., G.P. of Touchdown Mortgage Fund, L.P.

## - ATTENTION -

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