FORM D

JUN 1 8 200 SECTION

1036290

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

## FORM D

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

OMB APP	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated aver	age burden
Oure per reen	nee 16.00

SEC US	E ONLY						
Prefix	Serial						
ł	ì						
DATE RECEIVED							
J	1						

Name of Offering (  check if this is an amendment and name has changed, and indicate changed)	ge.)
Series B Convertible Preferred Stock Offering	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4	(6) ULOE
Type of Filing: ☑ New Filing ☐ Amendment	
A. BASIC IDENTIFICATION DATA	04020
Enter the information requested about the issuer	07032779
Name of Issuer (  check if this is an amendment and name has changed, and indicate change.)	
The Cobalt Group, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2200 First Avenue South, Suite 400, Seattle, WA 98134	(206) 269-6363
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 Online commerce industry	PROCESSED
Type of Business Organization	er (please specify): JUN 22 2004
	er (please specify):
☐ business trust ☐ limited partnership, to be formed	THOMSON
Month Year	FINANCIAL
Actual or Estimated Date of Incorporation or Organization: 0 3 SA	ctual   Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	State:
CN for Canada; FN for other foreign jurisdicti	on) W A

#### 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 IDEN	TIFICATION DATA		
2. Enter the information requ	ested for the follo				
Each promoter of the i	ssuer, if the issuer	has been organized within th	e past five years;		•
·			•	% or more of a cla	ss of equity securities of the issuer;
		rporate issuers and of corpora			
· Each general and man	aging partner of pa	rtnership issuers.			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Holt, John W.P.	ndividual)				
Business or Residence Address 2200 First Avenue South, Sui	•	· · · · · · · · · · · · · · · · · · ·			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Tullman, Howard	ndividual)				
Business or Residence Address 2200 First Avenue South, Sui	•				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Landy, Joseph	ndividual)				
Business or Residence Address 2200 First Avenue South, Sui	•				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Pomerantz, Ernest	ndividual)				
Business or Residence Address 2200 First Avenue South, Sui	•				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Power, J.D., III	ndividual)				
Business or Residence Address 2200 First Avenue South, Sui	•	•			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Back, Gregory	ndividual)				
Business or Residence Address 2200 First Avenue South, Sui					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Weglicki, Timothy	ndividual)				
Business or Residence Address 2200 First Avenue South, Sui				,	
	(Use blan	k sheet, or copy and use addit	tional copies of this sheet, as	necessary.)	

#### 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 ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Mathews, Scott Business or Residence Address (Number and Street, City, State, Zip Code) 2200 First Avenue South, Suite 400, Seattle, WA 98134 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Krishnamurty, Rajan Business or Residence Address (Number and Street, City, State, Zip Code) 2200 First Avenue South, Suite 400, Seattle, WA 98134 Check Box(es) that Apply: □ Promoter □ Beneficial Owner ■ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Smail, Terrance Business or Residence Address (Number and Street, City, State, Zip Code) 2200 First Avenue South, Suite 400, Seattle, WA 98134 Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Warburg, Pincus Equity Partners, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 466 Lexington Avenue, New York, NY 10017 Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) ABS Capital Partners IV, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 400 East Pratt Street, Suite 910, Baltimore, MD 21202 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Oak Investment Partners X, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 525 University Avenue, Suite 1300, Palo Alto, CA 94301 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Brunz, Lee Business or Residence Address (Number and Street, City, State, Zip Code) 2200 First Avenue South, Suite 400, Seattle, WA 98134

				В.	INFORMA	TION AB	OUT OFF	ERING					
			· · · · · · · · · · · · · · · · · · ·										No
1.	Has the issue	r sold, or d							•				$\boxtimes$
					• •								
2.	Answer also in Appendix, Column 2, if filing under ULOE.  Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?  Does the offering permit joint ownership of a single unit?  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 (s) persons to be listed are associated person or states, list he name of the broker or dealer. The more than five (s) 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.  are (Last name first, if individual)  essor Residence Address (Number and Street, City, State, Zip Code)  of Associated Broker or Dealer  in Which Person Listed Has Solicited or Intends to Solicit Purchasers  leck "All States" or check individual States).  [AX] [AX] [AX] [AX] [AX] [AX] [AX] [AX]		N/A										
3.	Does the offe	ring nermi	t ioint owne	rshin of a s	single unit?							Yes	No ⊠
			•	-	•							U	
	commission of If a person to or states, list	or similar r be listed i the name o	emunerations an associated the broke	n for solici ated person er or dealer	tation of proof or agent of the contract of th	urchasers in f a broker o han five (5	n connection dealer re pr dealer re persons to	n with sale gistered wi be listed	s of securit	ties in the c and/or with	offering.		
Full Na	ame (Last nan	ne first, if i	ndividual)										
Busine	ess or Residen	ce Address	(Number a	nd Street, (	City, State,	Zip Code)							
Name	of Associated	Broker or	Dealer					<u>_</u>					
States	in Which Pers	on Listed I	Has Solicite	d or Intend	s to Solicit	Purchasers		<u> </u>	······································				
												□ All	States
(AL)				•								[11]	
[IL]			[KS]	[KY]	[LA]		[MD]	[MA]				[MC	
[MT] [RI]												[ P <i>F</i> [ PF	
	· 			nd Street, (	City, State, 2	Zip Code)							
Name	of Associated	Broker or	Dealer										
States	in Which Pers	on Listed I	Has Solicite	d or Intend	s to Solicit	Purchasers							
(Ch	eck "All State	s" or checl	k individual	States)								□ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[II]	)]
[IL]												[MC	
[MT]												[PA [PF	
						[ 4 1 ]	[ 711]			[11]		[11	
	(								•				
Busine	ss or Residen	ce Address	(Number a	nd Street, (	City, State,	Zip Code)	<del></del>						
Name	of Associated	Broker or	Dealer	·- <u></u>									
States	in Which Pers	on Listed I	Has Solicite	d or Intend	s to Solicit	Purchasers				<del> </del>			
												□ All	States
(AL)												[II	
[IL]							[MD]	[MA]	[MI]	[MN]		[MC	
[MT]		[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA	-
ודקו	ເຂຕາ	[GD]	ſŦŊl	[TX]	(וודו	[ידיעד]	[VA]	[W]	[WV]	[WT]	[WY]	aq ]	/ L

# 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 \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	C	Aggregate  Iffering Price	Ar	nount Already Sold
	Debt	\$_		\$_	
	Equity	\$	47,107,805	\$	47,107,805
	☐ Common ☒ Preferred				
	Convertible Securities (including warrants)	\$_		\$_	
	Partnership Interests	\$_		\$_	
	Other (Specify)	\$_		\$_	
	Total				47,107,805
	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	Ι	Aggregate Dollar Amount of Purchases
	Accredited Investors		10	\$_	47,107,805
	Non-accredited Investors		0	\$_	0
	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 Security	D	ollar Amount Sold
	Rule 505			\$	•
	Regulation A	_		\$	
	Rule 504	_		- \$	
	Total	_		s-	
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		⊠	\$_	150,000
	Accounting Fees			\$_	
	Engineering Fees			\$_	
	Sales Commissions (specify finders' fees separately)			\$_	
	Other Expenses (identify)			\$_	
	Total		⊠	\$_	150,000

ST W	C::OFFERING PRICE, NUMI	BER OF INVESTORS, EXP	ENSES AND USE	OF P	ROCEEDS		
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C - Q proceeds to the issuer."	uestion 4.a. This difference	is the "adjusted gr	oss		\$_	46,957,805
5.	Indicate below the amount of the adjusted gross proceed 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 C - Q	purpose is not known, fur the payments listed must eq	nish an estimate	and			
					Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees		[	⊐\$_		□\$_	
	Purchase of real estate		(	□\$			
	Purchase, rental or leasing and installation of machin	nerv					
	and equipment						
	Construction or leasing of plant buildings and faciliti	ies		⊐ \$_		□ \$_	
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets of issuer pursuant to a merger)	or securities of another		٦\$		□\$	
	Repayment of indebtedness			-			
	Working capital						29,850,000
	Other (specify):			⊐ \$_		□ \$_	
				⊐\$_		□\$_	
	Column Totals					⊠ \$	29,850,000
	Total Payments Listed (column totals added)					46,95 <u>7</u>	
\$35 <sup>8</sup> C.2		D EEDERAL SICNAEL	TD.C	(S., 17°C)		Z. 2. 7.	Could of the M
1							
sign	e issuer has duly caused this notice to be singed by the nature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accredited	nish to the U.S. Securities	and Exchange Co	mmis			
Issu	ner (Print or Type)	gnature			Date		
Th	e Cobalt Group, Inc.	the tops	m-/-	7	June 16, 2004		
Naı	ne of Signer (Print or Type)	itle of Signer (Print of Type)		<b>ナ</b>	······································		
τ	I Brung	namatamy					

أربأتها الأ	And the American State of the S	E. STATE SIGNATURE		The Julian	2005/AR
1.	Is any party described in 17 CFR 230.262 provisions of such rule?			Yes	No ⊠
		See Appendix, Column 5, for state	response.		
2.	The undersigned issuer hereby undertakes D (17 CFR 239.500) at such times as requi		of any state in which this notice is filed, a not	ice on	Form
3.	The undersigned issuer hereby undertake issuer to offerees.	es to furnish to the state administra	ators, upon written request, information furni	shed b	y the
4.		the state in which this notice is file	tions that must be satisfied to be entitled to to and understands that the issuer claiming the n satisfied.		
	suer has read this notification and knows the uthorized person.	e contents to be true and has duly cau	used this notice to be signed on its behalf by the	under	signed
Issuer	(Print or Type)	Signature	Date		
The C	Cobalt Group, Inc.	Ale To I	June 16, 2004		
Name	of Signer (Print or Type)	Title of Signer (Print or Type)			

Secretary

# Instruction:

Lee J. Brunz

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.

				АР	PENDIX				्राष्ट्रीतर अस्तुव्य स्त्राप्ट रूप्ट स्टिन्स्ट विक	
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 f investor and archased in State to C-Item 2)		Disqualification under State ULOE (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	
AL										
AK	ļ						-			
AZ		1								
AR CA		х	Series B Convertible Preferred Stock; \$15,000,000	2	\$15,000,000	0	0		X	
СО							<del></del>			
CT							 			
DE										
DC										
FL										
GA										
HI										
ID							·			
止		<u> </u>						ļ		
<u>IN</u>										
IA					·					
KS										
KY									ļl	
LA							The state of the s			
ME							· ·			
MD		х	Series B Convertible Preferred Stock; \$15,000,000	4	\$15,000,000	0	0		X	
MA										
MI										

APPENDIX

1	Intend to non-a investor	1 to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pi	4 f investor and urchased in State t C-Item 2)		5 Disqualification under State ULOE (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	
MN	· · · · · · · · · · · · · · · · · · ·									
MS										
MO										
MT										
NE										
NV										
NH										
NJ										
NM										
NY		x	Series B Convertible Preferred Stock; \$17,107,805	4	\$17,107,805	0	0		X	
NC				·····						
ND										
ОН										
OK										
OR										
PA										
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA						***************************************				
WA							, , , , , , , , , , , , , , , , , , ,			

AP	PF!	NDIX	Č

1		2	3			5 Disqualification			
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state		Type o		under Sta (if yes explan waiver	ate ULOE, attach ation of granted)	
State	Yes	No	(Part C-Item 1)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	-Item 1) No
WV									
WI									
WY									
PR									