

1320071

FORM D
Notice of Exempt
Offering of Securities

U.S. Securities and Exchange Commission
Washington, DC 20549

OMB APPROVAL
OMB Number: 3235-0076
Expires: December 31, 2008
Estimated average burden
hours per response: 4.00

(See instructions beginning on page 5)

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

Item 1. Issuer's Identity

Name of Issuer: Ciclon Semiconductor Device Corp.
Jurisdiction of Incorporation/Organization: Delaware
Year of Incorporation/Organization: 2004
Entity Type: Corporation
Previous Name(s): Ciclon Semiconductor Device Corp.
Entity Type (Select one):
[X] Corporation
[ ] Limited Partnership
[ ] Limited Liability Company
[ ] General Partnership
[ ] Business Trust
[ ] Other (Specify)

(If more than one issuer is filing this notice, check this box [ ] and identify additional issuer(s) by attaching Items 1 and 2 Continuation Page(s).)

Item 2. Principal Place of Business and Contact Information

Street Address 1: 116 Research Drive
City: Bethlehem
State/Province/Country: PA
ZIP/Postal Code: 18015
Phone No.: (610) 849-5100

Item 3. Related Persons

Last Name: Granahan
First Name: Mark
Middle Name:
Street Address 1: c/o Ciclon Semiconductor Device Corp.
Street Address 2: 116 Research Drive
City: Bethlehem
State/Province/Country: PA
ZIP/Postal Code: 18015
Relationship(s): [X] Executive Officer [X] Director [ ] Promoter

PROCESSED
JAN 28 2009
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(Identify additional related persons by checking this box [X] and attaching Item 3 Continuation Page(s).)

Item 4. Industry Group (Select one)

- Agriculture
Banking and Financial Services
Business Services
Energy
Health Care
Manufacturing
Real Estate
Construction
REITS & Finance
Residential
Other Real Estate
Retailing
Restaurants
Technology
Travel
Other

Item 5. Issuer Size (Select one)

Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)

- No Revenues
- \$1 - \$1,000,000
- \$1,000,001 - \$5,000,000
- \$5,000,001 - \$25,000,000
- \$25,000,001 - \$100,000,000
- Over \$100,000,000
- Decline to Disclose
- Not Applicable

OR

Aggregate Net Asset Value Range (for issuer specifying "hedge" or "other investment" fund in Item 4 above)

- No Aggregate Net Asset Value
- \$1 - \$5,000,000
- \$5,000,001 - \$25,000,000
- \$25,000,001 - \$50,000,000
- \$50,000,001 - \$100,000,000
- Over \$100,000,000
- Decline to Disclose
- Not Applicable

Item 6. Federal Exemptions and Exclusions Claimed (Select all that apply)

Investment Company Act Section 3(c)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Rule 504(b)(1) (not (i), (ii) or (iii)) | <input type="checkbox"/> Section 3(c)(1) | <input type="checkbox"/> Section 3(c)(9)  |
| <input type="checkbox"/> Rule 504(b)(1)(i)                       | <input type="checkbox"/> Section 3(c)(2) | <input type="checkbox"/> Section 3(c)(10) |
| <input type="checkbox"/> Rule 504(b)(1)(ii)                      | <input type="checkbox"/> Section 3(c)(3) | <input type="checkbox"/> Section 3(c)(11) |
| <input type="checkbox"/> Rule 504(b)(1)(iii)                     | <input type="checkbox"/> Section 3(c)(4) | <input type="checkbox"/> Section 3(c)(12) |
| <input type="checkbox"/> Rule 505                                | <input type="checkbox"/> Section 3(c)(5) | <input type="checkbox"/> Section 3(c)(13) |
| <input checked="" type="checkbox"/> Rule 506                     | <input type="checkbox"/> Section 3(c)(6) | <input type="checkbox"/> Section 3(c)(14) |
| <input type="checkbox"/> Securities Act Section 4(6)             | <input type="checkbox"/> Section 3(c)(7) |   |

Item 7. Type of Filing

- New Notice      OR       Amendment

Date of First Sale in this Offering:  OR  First Sale Yet to Occur

Item 8. Duration of Offering

Does the issuer intend this offering to last more than one year?  Yes  No

Item 9. Type(s) of Securities Offered (Select all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Equity   | <input type="checkbox"/> Pooled Investment Fund Interests |
| <input checked="" type="checkbox"/> Debt  | <input type="checkbox"/> Tenant-in-Common Securities      |
| <input checked="" type="checkbox"/> Option, Warrant or Other Right to Acquire Another Security                                  | <input type="checkbox"/> Mineral Property Securities      |
| <input checked="" type="checkbox"/> Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security | <input type="checkbox"/> Other (Describe)                 |

Item 10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?  Yes  No

Clarification of Response (if Necessary)

Item 11. Minimum Investment

Minimum investment accepted from any outside investor \$ 0.00

Item 12. Sales Compensation

Recipient: n/a (Associated) Broker or Dealer  None  
 Recipient CRD Number: (Associated) Broker or Dealer CRD Number  No CRD Number  
 Street Address 1: Street Address 2:  
 City: State/Province/Country: ZIP/Postal Code:

States of Solicitation  All 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  NE  NV  NH  NJ  NM  NY  NC  ND  OH  OK  OR  PA  
 RI  SC  SD  TN  TX  UT  VT  VA  WA  WV  WI  WY  PR

(Identify additional person(s) being paid compensation by checking this box  and attaching Item 12 Continuation Page(s).)

Item 13. Offering and Sales Amounts

(a) Total Offering Amount \$ 2,500,000.00 OR  Indefinite  
 (b) Total Amount Sold \$ 500,000.00  
 (c) Total Remaining to be Sold (Subtract (a) from (b)) \$ 2,000,000.00 OR  Indefinite

Clarification of Response (if Necessary)

Item 14. Investors

Check this box  if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering:

0

Enter the total number of investors who already have invested in the offering: 6

Item 15. Sales Commissions and Finders' Fees Expenses

Provide separately the amounts of sales commissions and finders' fees expenses, if any. If an amount is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$ 0.00  Estimate  
 Finders' Fees \$ 0.00  Estimate

Clarification of Response (if Necessary)

**Item 16. Use of Proceeds**

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$   Estimate

Clarification of Response (if Necessary)

**Signature and Submission**

Please verify the information you have entered and review the Terms of Submission below before signing and submitting this notice.

**Terms of Submission.** In Submitting this notice, each identified issuer is:

Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in accordance with applicable law, the information furnished to offerees.\*

Irrevocably appointing each of the Secretary of the SEC and the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes; or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.

Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.

Each identified issuer has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person. (Check this box  and attach Signature Continuation Pages for signatures of issuers identified in Item 1 above but not represented by signer below.)

Issuer(s)

Name of Signer

Signature

Title

Number of continuation pages attached:

Date

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 number.

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name	First Name	Middle Name
Byram	Steven	
Street Address 1	Street Address 2	
c/o Cidlon Semiconductor Device Corp.	116 Research Drive	
City	State/Province/Country	ZIP/Postal Code
Bethlehem	PA	18015
Relationship(s):	<input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Promoter <input type="checkbox"/> Director	
Clarification of Response (if Necessary)		

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Last Name	First Name	Middle Name
Burns	Michael	
Street Address 1	Street Address 2	
c/o Cidlon Semiconductor Device Corp.	116 Research Drive	
City	State/Province/Country	ZIP/Postal Code
Bethlehem	PA	18015
Relationship(s):	<input type="checkbox"/> Executive Officer <input type="checkbox"/> Promoter <input checked="" type="checkbox"/> Director	
Clarification of Response (if Necessary)		

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Last Name	First Name	Middle Name
DeNino	Mark	J.
Street Address 1	Street Address 2	
c/o Cidlon Semiconductor Device Corp.	116 Research Drive	
City	State/Province/Country	ZIP/Postal Code
Bethlehem	PA	18015
Relationship(s):	<input type="checkbox"/> Executive Officer <input type="checkbox"/> Promoter <input checked="" type="checkbox"/> Director	
Clarification of Response (if Necessary)		

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Last Name	First Name	Middle Name
Koeltl	Richard	
Street Address 1	Street Address 2	
c/o Cidlon Semiconductor Device Corp.	116 Research Drive	
City	State/Province/Country	ZIP/Postal Code
Bethlehem	PA	18015
Relationship(s):	<input type="checkbox"/> Executive Officer <input type="checkbox"/> Promoter <input checked="" type="checkbox"/> Director	
Clarification of Response (if Necessary)		

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name	First Name	Middle Name
Walker	Laurence	G.
Street Address 1	Street Address 2	
c/o Ciclon Semiconductor Device Corp.	116 Research Drive	
City	State/Province/Country	ZIP/Postal Code
Bethlehem	PA	18015
Relationship(s):	<input type="checkbox"/> Executive Officer <input type="checkbox"/> Promoter <input checked="" type="checkbox"/> Director	
Clarification of Response (if Necessary)		

Last Name	First Name	Middle Name
Sun	Tony	
Street Address 1	Street Address 2	
c/o Ciclon Semiconductor Device Corp.	116 Research Drive	
City	State/Province/Country	ZIP/Postal Code
Bethlehem	PA	18015
Relationship(s):	<input type="checkbox"/> Executive Officer <input type="checkbox"/> Promoter <input checked="" type="checkbox"/> Director	
Clarification of Response (if Necessary)		

Last Name	First Name	Middle Name
Street Address 1	Street Address 2	
City	State/Province/Country	ZIP/Postal Code
Relationship(s):	<input type="checkbox"/> Executive Officer <input type="checkbox"/> Promoter <input type="checkbox"/> Director	
Clarification of Response (if Necessary)		

Last Name	First Name	Middle Name
Street Address 1	Street Address 2	
City	State/Province/Country	ZIP/Postal Code
Relationship(s):	<input type="checkbox"/> Executive Officer <input type="checkbox"/> Promoter <input type="checkbox"/> Director	
Clarification of Response (if Necessary)		

END