The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

L					T		
	UNI	TED STATES SECURIT			SSION	OMB APPR	OVAL 3235-
		Washi	ngton, D.C. 205 FORM D	549		Number: Estimated a	0076
		Notice of Exe	mpt Offering of	f Securities		burden hours per	4.00
						response:	
1. Issuer's Identi	ty						
CIK (I	Filer ID Nun	nber) Previou Name	X NODE		Er	itity Type	
<u>0001356090</u>					X Corporation		
Na	ame of Issue	r			Limited Partne	ership	
INTREXON CO	ORP				Limited Liabil	lity Company	
	irisdiction of				General Partne	ership	
-	ration/Organ	nization			Business Trus	t	
VIRGINIA					Other (Specify	7)	
	-	tion/Organization					
X Over Five Ye	-						
Within Last I Yet to Be For		pecify Year)					
2. Principal Plac	e of Business	s and Contact Informatio	n				
	Name o	of Issuer					
INTREXON CO	ORP						
	Street A	ddress 1		Street A	Address 2		
1750 KRAFT D	ORIVE		SUITE 1	400			
Cit	у	State/Province/Cour	itry ZI	P/PostalCode	Phone Number	r of Issuer	
BLACKSBURG	Ĵ	VIRGINIA	24060		540-961-0725		
3. Related Perso	ns						
La	ast Name		First Name		Middle Name		
Reed		Thomas					
Stree	et Address 1	Str	eet Address 2				
1750 KRAFT D	ORIVE	SUITE 1400					
	City		Province/Coun	0	ZIP/PostalCod	e	
BLACKSBURG	J	VIRGINIA		24060			
Relationship: 2	X Executive (Officer X Director Pro	moter				
Clarification of 1	Response (if	Necessary):					
	ast Name		First Name		Middle Name		
Crisp		Matt					
-	et Address 1		eet Address 2				
1750 KRAFT D		SUITE 1400					

State/Province/Country

VIRGINIA

ZIP/PostalCode

24060

Clarification of Response (if Necessary):

City

BLACKSBURG

Last Name	First Name	Middle Name
Sterling	Rick	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Office	er Director Promoter	
Clarification of Response (if Neces	ssary):	
Last Name	First Name	Middle Name
Beech	Robert	Р.
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Office	er Director Promoter	
Clarification of Response (if Neces	ssary):	
Last Name	First Name	Middle Name
Kirk	Randal	J.
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Office		
Clarification of Response (if Neces Last Name	First Name	Middle Name
Alvarez	Cesar	L.
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: Executive Office	r X Director Promoter	
Clarification of Response (if Nece	ssary):	
Last Name	First Name	Middle Name
Frank	Steven	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: Executive Officer	r X Director Promoter	
Clarification of Response (if Nece	ssary):	
Last Name	First Name	Middle Name
Horner	Larry	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Mitchell	Dean	J.
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: Executive Officer 2	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
Shapiro	Robert	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: Executive Officer 2	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
Rieger	Jayson	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
	State/Drowinco/Country	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
BLACKSBURG	VIRGINIA	
BLACKSBURG Relationship: X Executive Officer	VIRGINIA Director Promoter	
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name	VIRGINIA Director Promoter	
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess	VIRGINIA Director Promoter ary):	24060
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name	VIRGINIA Director Promoter ary): First Name	24060
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1	VIRGINIA Director Promoter ary): First Name Grace	24060
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1	VIRGINIA Director Promoter ary): First Name Grace Street Address 2	24060
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400	24060 Middle Name
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE City	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400 State/Province/Country VIRGINIA	24060 Middle Name ZIP/PostalCode
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE <u>City</u> BLACKSBURG	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter	24060 Middle Name ZIP/PostalCode
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter	24060 Middle Name ZIP/PostalCode
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary):	24060 Middle Name ZIP/PostalCode 24060
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name	24060 Middle Name ZIP/PostalCode 24060
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Goralski	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name Tom	24060 Middle Name ZIP/PostalCode 24060
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Goralski Street Address 1 1750 KRAFT DRIVE	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name Tom Street Address 2 SUITE 1400	24060 Middle Name ZIP/PostalCode Additional Middle Name Middle Name
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Goralski Street Address 1 1750 KRAFT DRIVE City	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name Tom Street Address 2 SUITE 1400 State/Province/Country	24060 Middle Name ZIP/PostalCode Middle Name ZIP/PostalCode
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Goralski Street Address 1 1750 KRAFT DRIVE City BLACKSBURG	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name Tom Street Address 2 SUITE 1400 State/Province/Country VIRGINIA	24060 Middle Name ZIP/PostalCode Additional Middle Name Middle Name
BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Colon Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necess Last Name Goralski Street Address 1 1750 KRAFT DRIVE City	VIRGINIA Director Promoter ary): First Name Grace Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name Tom Street Address 2 SUITE 1400 State/Province/Country VIRGINIA	24060 Middle Name ZIP/PostalCode Middle Name ZIP/PostalCode

Zapata

Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer	Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter	ZIP/PostalCode 24060	
Clarification of Response (if Necess	ary):		
Last Name	First Name	Middle Name	
Kasser	Thomas		
Street Address 1 1750 KRAFT DRIVE	Street Address 2		
City	SUITE 1400	ZIP/PostalCode	
BLACKSBURG	State/Province/Country VIRGINIA	24060	
Relationship: X Executive Officer		24000	
_			
Clarification of Response (if Necess	iiy):		
Last Name	First Name	Middle Name	
Lehr	Donald		
Street Address 1	Street Address 2		
1750 KRAFT DRIVE	SUITE 1400 State/Province/Country	ZIP/PostalCode	
City BLACKSBURG	State/Province/Country VIRGINIA	24060	
Relationship: X Executive Officer		24000	
Last Name	First Name	Middle Name	
Webster	Darryl		
Street Address 1	Street Address 2 SUITE 1400		
1750 KRAFT DRIVE		71D/DestalCode	
City	State/Province/Country	ZIP/PostalCode	
City BLACKSBURG	State/Province/Country VIRGINIA	ZIP/PostalCode 24060	
City BLACKSBURG Relationship: X Executive Officer	State/Province/Country VIRGINIA Director Promoter		
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa	State/Province/Country VIRGINIA Director Promoter ary):	24060	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name	State/Province/Country VIRGINIA Director Promoter ary): First Name		
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy	24060	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy Street Address 2	24060	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1 1750 KRAFT DRIVE	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy Street Address 2 SUITE 1400	24060 Middle Name	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1 1750 KRAFT DRIVE City	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy Street Address 2	24060	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1 1750 KRAFT DRIVE	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy Street Address 2 SUITE 1400 State/Province/Country VIRGINIA	24060 Middle Name ZIP/PostalCode	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1 1750 KRAFT DRIVE City BLACKSBURG	State/Province/Country VIRGINIA Director Promoter Prist Name Timothy Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter	24060 Middle Name ZIP/PostalCode	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary):	24060 Middle Name ZIP/PostalCode 24060	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name	24060 Middle Name ZIP/PostalCode	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kindler	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name Jeffrey	24060 Middle Name ZIP/PostalCode 24060	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kindler Street Address 1	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name Jeffrey Street Address 2	24060 Middle Name ZIP/PostalCode 24060	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kindler Street Address 1 1750 KRAFT DRIVE	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name Jeffrey Street Address 2 SUITE 1400	24060 Middle Name ZIP/PostalCode Additional Middle Name Middle Name	
City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kasbe Street Address 1 1750 KRAFT DRIVE City BLACKSBURG Relationship: X Executive Officer Clarification of Response (if Necessa Last Name Kindler Street Address 1	State/Province/Country VIRGINIA Director Promoter ary): First Name Timothy Street Address 2 SUITE 1400 State/Province/Country VIRGINIA Director Promoter ary): First Name Jeffrey Street Address 2	24060 Middle Name ZIP/PostalCode 24060	

Clarification of Response (if Necessary):

Last Name	First Name		Middle Name
Krishnan	Krish	S.	
Street Address 1	Street Address 2		
1750 KRAFT DRIVE	SUITE 1400		
City	State/Province/Country		ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060	
Relationship: X Executive Officer	Director Promoter		

Clarification of Response (if Necessary):

4. Industry Group

Agriculture		Health Care	Retailing
Banking & Financial Services		X Biotechnology	Restaurants
Commercial Bank	ing	Health Insurance	Technology
Insurance Investing		Hospitals & Physicians	Computers
Investment Banki	ıg	Pharmaceuticals	Telecommunications
Pooled Investmen	t Fund	Other Health Care	Other Technology
Is the issuer regist		Manufacturing	Travel
an investment con the Investment Co	1 0	Real Estate	Airlines & Airports
Act of 1940?	mpany	Commercial	Lodging & Conventions
Yes	No	Construction	Tourism & Travel Services
Other Banking &	Financial Services	REITS & Finance	Other Travel
Business Services		Residential	Other
Energy		Other Real Estate	
Coal Mining			

Electric Utilities

Energy Conservation

Environmental Services

- Oil & Gas
- Other Energy

5. Issuer Size

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

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Rule 504(b)(1) (not (i), (ii) or (iii))	Rule 505
Rule 504 (b)(1)(i)	X Rule 506
Rule 504 (b)(1)(ii)	Securities Act Section 4(5)

Rule 504 (b)(1)(iii) Inv	vestment Company A	ct Section 3(c)	
	ction 3(c)(1)	Section 3(c)(9)	
Se	ction 3(c)(2)	Section 3(c)(10)	
Se	ction 3(c)(3)	Section 3(c)(11)	
	ction 3(c)(4)	Section 3(c)(12)	
	ction 3(c)(5)	Section 3(c)(13)	
	ction 3(c)(6)	Section 3(c)(14)	
	tion 3(c)(7)		
7. Type of Filing			
New Notice Date of First Sale 2011-12-23 First S X Amendment	ale Yet to Occur		
8. Duration of Offering			
Does the Issuer intend this offering to last more than on	e year? Yes X No		
9. Type(s) of Securities Offered (select all that apply)			
X Equity	Pooled I	nvestment Fund Interests	
Debt		n-Common Securities	
Option, Warrant or Other Right to Acquire Another S	-	Property Securities	
Security to be Acquired Upon Exercise of Option, Wa	arrant or Other (d	escribe)	
Other Right to Acquire Security			
10. Business Combination Transaction			
Is this offering being made in connection with a busines a merger, acquisition or exchange offer?	s combination transa	ction, such as Yes X No	
Clarification of Response (if Necessary):			
11. Minimum Investment			
Minimum investment accepted from any outside investo	or \$0 USD		
12. Sales Compensation			
Recipient	Recipient CRD I	Number None	
Perella Weinberg Partners LP	138618		
(Associated) Broker or Dealer X None	(Associated) Bro	ker or Dealer CRD Number X Non	e
None	None		
Street Address 1 767 Fifth Avenue		Street Address 2	
City	State/Province/C	vintry	ZIP/Postal Code
New York	NEW YORK	Junu y	10153
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	tes X Foreign/non-U	JS	
CONNECTICUT			
FLORIDA			
MARYLAND			

TEXAS

Total Offering Amount\$50,000,003 USD orIndefiniteTotal Amount Sold\$50,000,003 USDTotal Remaining to be Sold\$0 USD orIndefinite

Clarification of Response (if Necessary):

14. Investors

Select 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. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

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

42

Sales Commissions	\$310,000 USD 2	K Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

Estimated response represents the maximum amount to be paid in sales commissions.

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.

\$0 USD Estimate

Clarification of Response (if Necessary):

In the ordinary course of business, the issuer may use some of the proceeds of the offering to pay salaries to certain of its executive officers and directors.

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above 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 the 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).

Each Issuer identified above 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.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
INTREXON CORP	/s/ Rick L. Sterling	Rick L. Sterling	Chief Financial Officer	2012-01-24

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.

* 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.