FORM D

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

FORM D



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

OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per form......1

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						<u> </u>	
Name of Offering (check if this is an a	mendment and name has cha	nged, and i	ndicate change.)				
Sale of 4,837,879 shares of Series 3 Pi Issuance of Warrant to purchase Pre underlying shares of Common Stock iss	ferred Stock and the unde	rlying sha	ires of Preferred	•			
Filing Under (Check box(es) that apply):	Rule 504		Rule 505	⊠ Rule 506		☐ Section 4(6)	🗆 നൂള്ള
Type of Filing:		□ N	ew Filing		X	Amendment	शिक्षा ११० : क्ट्यो ख
	A. BA	SIC IDEN	TIFICATION DA	NTA			EFEC MON
1. Enter the information requested about	ut the issuer						1144 1 5 7888
Name of Issuer (check if this is an ame	endment and name has change	ed, and ind	icate change.)				1157 1 3 7MMU
Sonim Technologies, Inc.							
Address of Executive Offices	(Number and	Street, City	, State, Zip Code)	Telephone Nui	mber (lı	ncluding Area Cod	le) Washington, DC
1875 South Grant Street, Suite 620, Sar	1 Mateo, CA 94402			650-378-8			104
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, St	ate, Zip Co	d)	Telephone Nu	mber (I	ncluding Area Coo	ie)
Same				Same			
Brief Description of Business Manufacturer and distributor of mobile	e phones and provider of sta	ndards-ba	sed voice services	s platform and ve	oice ins	tant messaging a	pplications
Type of Business Organization						P	ROCESSED
⊠ corporation	☐ limited partnership, alre	ady formed				other (please speci	ify):
☐ business trust	☐ limited partnership, to b	e formed				1	MAY 2 2 2008
Actual or Estimated Date of Incorporation	•	<u>Mon</u> 08	ï	<u>Year</u> 1999	(2)	Ι	MSON REUTERS
Jurisdiction of Incorporation or Organizat	ion: (Enter two-letter U.S. CN for Canada; FN for			for State:			DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulatin 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 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.

Potential persons who are to 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 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	☐ Executive Officer	☑ Director	General and/or Managing Partner
	t name first, if individual)				
Murray, Robi	•				
	-	Street, City, State, Zip Code)			
	*	d Road, Menio Park, CA 940)25	<u> </u>	
Check Boxes that Apply:	☐ Promoter	■ Beneficial Owner ■ Compare the second of the second o	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Las Schilling, Mat	t name first, if individual)				
	sidence Address (Number and	Street, City, State, Zip Code)			·
c/o BV Capita	, 600 Montgomery Street, 43	^{3rd} Floor, San Francisco, CA	94111		
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Las Plaschke, Rob	t name first, if individual) ert				
	· · · · · · · · · · · · · · · · · · ·	Street, City, State, Zip Code)			
Check	Promoter	ant Street, Suite 800, San Ma Beneficial Owner	Executive Officer	☐ Director	☐ General and/or
Box(es) that Apply:	rromoter.	Beneficial Owner	Executive Office	□ Director	Managing Partner
	t name first, if individual)	,			
Wiklund, Joak					
	,	Street, City, State, Zip Code)			
		ant Street, Suite 800, San Ma			
Check Boxes that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
•	t name first, if individual) s Partners, L.P.				
	sidence Address (Number and d Road, Menlo Park, CA 94				
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
	t name first, if individual)				
	nbH & Co. Beteiligungs KG				
	sidence Address (Number and				
Check Boxes	ry Street, 43 rd , San Francisc		Пв: om		
that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Las	t name first, if individual)				
	idence Address (Number and	Street, City, State, Zip Code)			
c/o Accel Parti	iers, 16 St. James's Street, L	ondon SW1A 1ER United Ki	ngdom		
Check Boxes that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
-	t name first, if individual) ninces Limited A/C AE5				
Business or Res	idence Address (Number and ace, London W1B 1PT Unite				
			······································		

				Ð	, infun	IATION AB	OUI OFFE	KING				
1.	Has the issuer sold,	or does the iss	uer intend to				_	? g under ULO			Yes N	lo <u>X</u>
2.	What is the minimu	m investment t	that will be a	ccepted fro	m any indiv	vidual?			***************************************		\$	N/A
3.	Does the offering pe	ermit joint own	nership of a s	ingle urit?							Yes N	ioX
4.	Enter the informati solicitation of purch registered with the S broker or dealer, yo NE	hasers in conn SEC and/or wit	ection with th a state or s	sales of sec states, list th	curities in the name of t	he offering. the broker or	If a person	to be listed	is an associat	ed person or	agent of a	broker or dealer
Full	Name (Last name fir	rst, if individua	al)									
	iness or Residence A		er and Street,	, City, State	, Zip Code)	1						
Nam	ne of Associated Bro	ker or Dealer				·				·		
State	es in Which Person L	isted Has Soli	cited or Inter	nds to Solic	it Purchaser	S						
•	cck "All States" or ch		•							•••••••		
[AL		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	• •	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	-	[NV]	(NH)	[[U]	[NM]	[NY]	INCI	[ND]	[OH]	(OK)	[OR]	[PA]
[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	JVAJ	[VA]	[WV]	ĮWIJ	[WY]	[PR]
Full	Name (Last name fin	si, ii individua	11)									
Busi	iness or Residence A	ddress (Numbe	er and Street,	City, State	,Zip Code)							
Nam	ne of Associated Brol	ker or Dealer				· · · · · · · · · · · · · · · · · ·					· · · · · · · ·	
State	es in Which Person L	isted Has Soli	cited or Inter	nds to Solic	it Purchaser	s					•	
(Che	eck "All States" or cl	eck individual	States)	• • • • • • • • • • • • • • • • • • • •	***************************************	•••••					***************************************	🗆 All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	HII	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	(LA)	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	JMOJ
[MT	j [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	INCI	[ND]	ЮН	[OK]	[OR]	[PA]
(RI)		[SD]	ואדן	[XT]	נעדן	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last name fir	st, if individua	ıl)									
Busi	ness or Residence A	ddress (Numbe	er and Street,	City, State	, Zip Code)							
Nam	e of Associated Brol	ker or Dealer										
State	es in Which Person L	isted Has Solid	cited or Inter	ds to Solic	it Purchaser	s						
(Che	ck "All States" or ch	eck individual	States)		****************				***************************************		,	🗆 All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[[L]	[IN]	[LA]	ĮKSĮ	ĮKYJ	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
IMT	j [NE]	[NV]	[NH]	[IN]	[NM]	[NY]	INCI	[ND]	(OH)	(OK)	[OR]	[PA]
IRII	ISCI	ISDI	ITNI	IXXI	(IJT)	IVTI	IVA1	(VAI	IWVI	twn	(WY)	(PR)

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 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 Amount Already

	transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of t Type of Security	Aggregate	Amount Already
	.,,,,,	Offering Price	Sold
	Debt	\$0	so
	Equity		\$ 3,530,927.20
	☐ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$4,500.00*	\$0
	Partnership Interests.	\$ 0	\$0
	Other (Specify)	\$0	\$0
	Total		\$ 3,530,927.20
	Answer also in Appendix, Column 3, if filing under ULOE.		<u> </u>
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	Aggregate
		Investors	Dollar Amount of Purchases
	Accredited Investors	18	\$3,530,927.20
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		s
	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	Dollar Amount Sold
	Type of Offering		
	Rule 505		s
	Regulation A		S
	Rule 504		\$
	Total		\$
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	×	\$ 230,000.00
	Accounting Fees	Ö	\$
	Engineering Fees.		\$
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (Identify)		\$
	Total	函	\$ 230,000.00

C. OFFERING PRICE, NUMBER OF	NVESTORS, EXPENSES AND U	SE OF PROCEEDS	
 Enter the difference between the aggregate offering price given in response to Part C - Question 4.a. This difference is the "adjuste 			\$ <u>3,305,427.20</u>
 Indicate below the amount of the adjusted gross proceeds to the issuer of the amount for any purpose is not known, furnish an estimate and payments listed must equal the adjusted gross proceeds to the issuer set 	check the box to the left of the est	imate. The total of the n 4.b above. Payment to Officers,	Payment To
Salariae and frag		Directors, & Affiliates	Others
Salaries and fees. Purchase of real estate.		□ s	□ s
Purchase, rental or leasing and installation of machinery and equipment		S	□ s
Construction or leasing of plant buildings and facilities	•	□ s	□ s
Acquisition of other businesses (including the value of securities involved in	•	□ s	□ s
in exchange for the assets or securities of another issuer pursuant to a merger		□ s	□ s
Repayment of indebtedness		□ s	□ \$
Working capital		□ s	⋉ \$ <u>3,305,427,20</u>
Other (specify):		□s	□ \$
		□ s	_ s
Column Totals		□ s	
Total Payments Listed (column totals added)		₩ \$	
D. FED	ERAL SIGNATURE		
D. FED The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange on non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	authorized person. If this notice is		
The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange C	authorized person. If this notice is		furnished by the issuer to any
The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange (non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	authorized person. If this notice is a Commission, upon written request o		furnished by the issuer to any
The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange (non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Sonim Technologies, Inc.	authorized person. If this notice is a commission, upon written request o		furnished by the issuer to any
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ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

•	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disquaification provisions of such rule?	Yes	No X
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to the state administrator of any state in which the notice is filed, a notice on Form I) (17 CFR 2	39.500) at

- The undersigned issuer hereby undertakes to furnish to the state administrator of any state in which the notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Sonim Technologies, Inc.	D. 200	May <u>l ≤,</u> 2008
Name (Print or Type)	Title (Print or Type)	
Daniel Zimmermam	Assistant Secretary	

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.

APPENDIX Disqualification Type of security Intend to sell and aggregate under State ULOE (if offering price yes, attach Type of investor and to non-accredited investors in State offered in state amount purchased in State explanation of waiver granted (Part E-Item (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) Yes Number of Yes No State No Number of Amount Amount Accredited Non-Investors Accredited Investors AL ΑK ΑZ AR \$79,147.26 CA X \$79,147.26 Series 3 5 0 $\overline{\mathbf{x}}$ co Х \$19,997.89 Series 3 1 \$19,997.89 0 0 X СТ DE DC FL GA HI ID IL IN ΙA KS KY LA ME MD MA MI MN MS

ΜQ

				APPENDIX					
1		2	3		4				
	to non- investo	nd to sell accredited ors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and				Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E- Item 1)	
State	Yes	No		Number of Accredited Investors	Number of Amount Number of Amount Accredited Non-		Amount	Yes	No
мт				 		-			
NE						<u> </u>			
NV		-							
NH						-			
l							<u> </u>		
NM									
NY		Х	\$169,223.02 Series 3	1	\$169,223.02	0	0 .		Х
NC					1			İ	
ND									
ОН			,			<u> </u>			
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