

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

OMB APPROVAL OMB Number: 3235-0076 Expires: August 31, 2015 Estimated Average burden hours per response: 4.0

CIK (Filer ID Number)	Previous Name(s)	▼ None	Entity Type
0001429260			© Corporation
Name of Issuer			C Limited Partnership
CORONADO BIOSCIENCES	INC		C Limited Liability Company
Jurisdiction of Incorporation/Organization			C General Partnership
DELAWARE			C Business Trust
Year of Incorporation/Organ	ization		Other
Over Five Years Ago			Other
Within Last Five Years (Specify Year)	2006		
C Yet to Be Formed			

2. Principal Place of	Business and (Contact Informati	ion
Name of Issuer			
CORONADO BIOSCIENCES I	NC		
Street Address 1		Street Address 2	
45 ROCKEFELLER PLAZA		SUITE 2000	
City	State/Province/Country	ZIP/Postal Code	Phone No. of Issuer
NEW YORK	NEW YORK	10111	212-332-1665

Related Persor	าร	
Last Name	First Name	Middle Name
Lobell	J.	Jay
Street Address 1	St	reet Address 2
45 Rockefeller Plaza, Sui	ite 2000	
City	State/Province/Countr	y ZIP/Postal Code
New York	NEW YORK	10111
Relationship:	Executive Officer	Director Promoter
Clarification of Response (if	Necessary)	
,		
Last Name	First Name	Middle Name
Harvey	Jimmie	
Street Address 1	St	reet Address 2
45 Rockefeller Plaza, Sui	ite 2000	
City	State/Province/Countr	y ZIP/Postal Code

New York	NEW YO	ORK	10111	
Relationship:	Executive Officer	☑ Directo	r Promoter	
Clarification of Respon	nse (if Necessary)	· · · · · · · · · · · · · · · · · · ·	1	
Last Name	First Name	2	Middle Name	
Rosenwald	Lindsay		A.	
Street Address 1		Street Addre	ess 2	
45 Rockefeller Plaz	a, Suite 2000			
City		ince/Country	ZIP/Postal Code	
New York	NEW YO	ORK	10111	
Relationship:	Executive Officer	☑ Directo	r Promoter	
Clarification of Dans				
Clarification of Respon	ise (II ivecessary)			
Last Name	First Name	2	Middle Name	
Cooper	Glenn		L.	
Street Address 1		Street Addre		
45 Rockefeller Plaz	a. Suite 2000			
City		ince/Country	ZIP/Postal Code	
New York	NEW YO		10111	
Relationship:	Executive Officer	▽ Directo	r Promoter	
	Feed)	(Print)	•	
Clarification of Respon	ise (if Necessary)			
Last Name	First Name		Middle Name	
Rowinsky	Eric		K.	
Street Address 1		Street Addro		
45 Rockefeller Plaz		Street Address		
City		ince/Country	ZIP/Postal Code	
New York	NEW YO		10111	
Tew Tork				
Relationship:	Executive Officer	☑ Directo	r Promoter	
recationship.	Executive Officer	Directo	1 Tomotes	
Clarification of Respon	ise (if Necessary)			
Last Name	First Name		Middle Name	 1
Sandage	Bobby		W.	
Street Address 1		Street Addre	ess 2	
45 Rockefeller Plaz	a, Suite 2000			

New York	NEV	W YORK		10111	
Relationship:	Executive Off	ficer	Director	Pro	moter
Clarification of Respo	onse (if Necessary)				
Last Name	First 1	Name		Middle Name	
Ritter	Dale				
Street Address 1			Street Address 2		
45 Rockefeller Pla	za, Suite 2000				
City	State/	Province/Co	untry	ZIP/Postal Code	
New York	NEV	W YORK		10111	
Relationship:	Executive Off	ficer	Director	Pro	moter
Clarification of Respo	onse (if Necessary)				
	- 07				
<u> </u>					
Last Name	First 1	Name		Middle Name	
Barrett	Davi	d		J.	
Street Address 1			Street Address 2		
45 Rockefeller Pla	za, Suite 2000				
City		Province/Co	untry	ZIP/Postal Code	
New York		W YORK		10111	
LIVIT LUIK					
TOTAL TOTAL	INEV				
Relationship:	Executive Off	ficer [✓ Director		moter
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Relationship:	Executive Off	iicer	Director		moter
Relationship: Clarification of Respo	Executive Off		Director	Pro	moter
Relationship: Clarification of Respo	Executive Off	Name	Director	Pro Middle Name	moter
Relationship: Clarification of Responsible Last Name Rogers	Executive Officers (if Necessary)	Name		Middle Name W.	moter
Relationship: Clarification of Responsible Last Name Rogers Street Address 1	Executive Officers (if Necessary) First	Name	Director Street Address 2	Middle Name W.	moter
Relationship: Clarification of Responsible Last Name Rogers Street Address 1 45 Rockefeller Pla	Executive Officers onse (if Necessary) First Mich	Name nael	Street Address 2	Middle Name W.	moter
Relationship: Clarification of Responsion Last Name Rogers Street Address 1 45 Rockefeller Pla City	Executive Officers (if Necessary) First Mich	Name nael Province/Co	Street Address 2	Middle Name W. ZIP/Postal Code	moter
Relationship: Clarification of Responsible Last Name Rogers Street Address 1 45 Rockefeller Pla	Executive Officers (if Necessary) First Mich	Name nael	Street Address 2	Middle Name W.	moter
Relationship: Clarification of Responsion Last Name Rogers Street Address 1 45 Rockefeller Pla City	Executive Officers (if Necessary) First Mich	Name nael Province/Co	Street Address 2	Middle Name W. ZIP/Postal Code	moter
Relationship: Clarification of Responsion o	Executive Officers Executive Off	Name nael Province/Co	Street Address 2	Middle Name W. ZIP/Postal Code 10111	
Relationship: Clarification of Responsion o	Executive Officers Executive Off	Name nael Province/Co	Street Address 2	Middle Name W. ZIP/Postal Code 10111	
Relationship: Clarification of Responsion o	Executive Officers Executive Off	Name nael Province/Co	Street Address 2	Middle Name W. ZIP/Postal Code 10111	
Relationship: Clarification of Responsion o	Executive Officers Executive Off	Name nael Province/Co	Street Address 2	Middle Name W. ZIP/Postal Code 10111	
Relationship: Clarification of Responsion o	Executive Officers Executive Off	Name nael Province/Co	Street Address 2	Middle Name W. ZIP/Postal Code 10111	
Relationship: Clarification of Responsion o	Executive Officers Executive Off	Name nael Province/Co	Street Address 2	Middle Name W. ZIP/Postal Code 10111	
Relationship: Clarification of Response Last Name Rogers Street Address 1 45 Rockefeller Pla City New York Relationship: Clarification of Response	Executive Officers (if Necessary) First Mich Za, Suite 2000 State/ NEV Executive Officers (if Necessary)	Name nael Province/Co	Street Address 2	Middle Name W. ZIP/Postal Code 10111	
Relationship: Clarification of Responsion o	Executive Officers (if Necessary) First Mich Za, Suite 2000 State/ NEV Executive Officers (if Necessary)	Name nael Province/Co	Street Address 2 untry Director	Middle Name W. ZIP/Postal Code 10111	

0	Commercial Banking Insurance Investing Investment Banking Pooled Investment Fund Other Banking & Financial Services	Health Insurance Hospitals & Phy Pharmaceuticals Other Health Ca	Computers
6 6	usiness Services nergy Coal Mining Electric Utilities Energy Conservation Environmental Services Oil & Gas Other Energy	Real Estate C Commercial C Construction C REITS & Finan C Residential C Other Real Esta	O Tourism & Travel Services O Other Travel O Other
5. I	ssuer Size		
6.1	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	C C C C C C C C C C C C C C C C C C C	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 S) Claimed (select all that
		Thirtesament com	pany race section e(e)
▽ 1	Type of Filing New Notice Date of First Sal Amendment	2011-05-31	First Sale Yet to Occur
8. [Duration of Offering		
	the Issuer intend this offering to l	at more than one year?	C Yes © No

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

Security to be Acquired Upon	Other (descrition Transion with a businession or exchange of	action ss combination C Yes	€ No	
11. Minimum Investme	nt			
Minimum investment accepted from a investor	ny outside \$	25000	USD	
12. Sales Compensation	n			
Recipient		Recipient CRD Number	None	
National Securities Corporation		7569		
(Associated) Broker or Dealer	None	(Associated) Broker or I Number	Dealer CRD None	
Street Address 1		Street Address 2		
330 Madison Avenue, 18th Floor				
City	St	tate/Province/Country	ZIP/Postal Code	:
New York		NEW YORK	10017	
State(s) of Solicitation	States	Foreign/Non-US		
13. Offering and Sales	Amounts			
Total Offering Amount \$ 2678504	4	USD Indefinite		
Total Amount Sold \$ 2733839		USD		
Total Remaining to be Sold \$ 24051205	5	USD Indefinite		
Clarification of Response (if Necessary	v)			
Includes aggregate amount receive to purchase the Issuer's Common the Issuer's Series C Preferred Stowhere applicable). The warrants I	able upon exerc Stock and warr ock (assuming n	rants to purchase no net exercise,		
14. Investors				
Select if securities in the offer do not qualify as accredited in Number of such non-accredit offering	investors,	r may be sold to persons who o already have invested in the		

15. Sales Commissions & Finders' 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.

Sales Commissions \$	2200000	USD	Estimate			
Finders' Fees \$	0	USD	Estimate			
Clarification of Response (if Necessary)						

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	E stimate

Signature and Submission

Clarification of Response (if Necessary)

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, 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 it 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 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 Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

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
CORONADO BIOSCIENCES INC	Dale Ritter	Dale Ritter	Acting CFO	2011-06-06