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.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 **FORM D**

OMB APPROVAL

OMB Number: 3235-0076
Estimated average burden
hours per response: 4.00

Notice of Exempt Offering of Securities

4.1			
1. Issuer's Identity			
CIK (Filer ID Number)	Previous Names	X None	Entity Type
0001455365			X Corporation
Name of Issuer			Limited Partnership
COGNITION THERAPUTICS INC			<u> </u>
Jurisdiction of Incorporation/Orga			Limited Liability Company
DELAWARE			General Partnership
Year of Incorporation/Organization	on		Business Trust
			Other (Specify)
Over Five Years Ago	::F. W\ 2007		
Within Last Five Years (Spec	city Year) 2007		
Yet to Be Formed			
2. Principal Place of Business	and Contact Information		
Name of Issuer			
COGNITION THERAPUTICS INC			
Street Address 1		Street Address 2	
2403 SIDNEY STREET		SUITE 261	
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
PITTSBURGH	PENNSYLVANIA	15203	412-770-1621
3. Related Persons			
Last Name	First Name		Middle Name
Catalano	Susan		
Street Address 1	Street Address 2		
c/o Cognition Therapeutics, Inc.	2403 Sidney Street, S	Suite 261	
City	State/Province/Cou	untry	ZIP/PostalCode
Pittsburgh	PENNSYLVANIA		15203
Relationship: X Executive Office	er X Director Promoter		
Clarification of Response (if Nece	essary):		
L and Name a	Einst Nama		Middle Norse
Last Name	First Name		Middle Name
Safferstein Street Address 1	Harold Street Address 2		T.
Street Address 1		Puito 261	
c/o Cognition Therapeutics, Inc.	2403 Sidney Street, State/Province/Cou		ZIP/PostalCode
City		aritiy	
Pittsburgh Relationship: X Executive Office	PENNSYLVANIA		15203
· <u> </u>			
Clarification of Response (if Nece	essary):		
Last Name	First Name		Middle Name
Gailus	Robert		
Street Address 1	Street Address 2		
c/o Ogden CAP Associates, LLC	309 Park Avenue		
City	State/Province/Cou	untry	ZIP/PostalCode
New York	NEW YORK		10022
Relationship: Executive Office	er X Director Promoter		
Clarification of Response (if Nece			
Last Name	First Name		Middle Name
Hefti	Franz		F.
Street Address 1	Street Address 2		••

c/o Cognition Therapeutics, Inc.	2403 Sidney Street, Suite 261	
City	State/Province/Country	ZIP/PostalCode
Pittsburgh	PENNSYLVANIA	15203
Relationship: Executive Officer X Director	or Promoter	
Clarification of Bosponos (if Necessary):		
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Jain	Nada	Wildle Name
Street Address 1	Street Address 2	
c/o Cognition Therapeutics, Inc.	2403 Sidney Street, Suite 261	
City	State/Province/Country	ZIP/PostalCode
Pittsburgh	PENNSYLVANIA	15203
Relationship: Executive Officer X Director		
Troiduorioriip		
Clarification of Response (if Necessary):		
Last Name	First Name	Middle Name
Breedlove	Mark	
Street Address 1	Street Address 2	
c/o Cognition Therapeutics, Inc.	2403 Sidney Street, Suite 261	
City	State/Province/Country	ZIP/PostalCode
Pittsburgh	PENNSYLVANIA	15203
Relationship: Executive Officer X Director	or Promoter	
Clarification of Response (if Necessary):		
4. Industry Group		
П		
Agriculture	Health Care	Retailing
Banking & Financial Services	X Biotechnology	Restaurants
Commercial Banking	Health Insurance	
Insurance		Technology
Investing	Hospitals & Physicians	Computers
	Pharmaceuticals	Telecommunications
Investment Banking		
Pooled Investment Fund	Other Health Care	Other Technology
Is the issuer registered as	Manufacturing	Travel
an investment company under	Real Estate	Airlines & Airports
the Investment Company Act of 1940?	Commercial	_
		Lodging & Conventions
YesNo	Construction	Tourism & Travel Services
Other Banking & Financial Services	REITS & Finance	
Business Services		Other Travel
Energy	Residential	Other
Coal Mining	Other Real Estate	
Electric Utilities		
Energy Conservation		
Environmental Services		
Oil & Gas		
Other Energy		
<u>.</u>		
5. Issuer Size		
Payanya Panas	A A A I I A	Value Bassa
Revenue Range OR	Aggregate Net Asset	
X No Revenues	No Aggregate Net	Asset value
\$1 - \$1,000,000	\$1 - \$5,000,000	
\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,0	000,000
\$5,000,001 - \$25,000,000	\$25,000,001 - \$50	,000,000
\$25,000,001 - \$100,000,000	\$50,000,001 - \$10	
Over \$100,000,000	Over \$100,000,00	
Decline to Disclose	Decline to Disclos	o

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)	<u>X</u> Rule 506					
Rule 504 (b)(1)(ii)	Securities Act Section 4(5)					
Rule 504 (b)(1)(iii)	Investment Company Act Section 3(c)					
	Section 3(c)(1) Section 3(c)(9)					
	Section 3(c)(2) Section 3(c)(10)					
	Section 3(c)(3) Section 3(c)(11)					
	Section 3(c)(4) Section 3(c)(12)					
	Section 3(c)(5) Section 3(c)(13)					
	Section 3(c)(6) Section 3(c)(14)					
	Section 3(c)(7)					
7. Type of Filing						
V New Notice - Date of First Cole 2010 12 17 First	t Cala Vet ta Ocavia					
	t Sale Yet to Occur					
Amendment						
8. Duration of Offering						
Does the Issuer intend this offering to last more than of	one year? Yes X No					
9. Type(s) of Securities Offered (select all that appl	y)					
V Facility	Declard Investment Fund Interests					
X Equity Pooled Investment Fund Interests						
Debt	Tenant-in-Common Securities					
X Option, Warrant or Other Right to Acquire Another						
X Security to be Acquired Upon Exercise of Option, \to Acquire Security	Other (describe)					
10. Business Combination Transaction						
Is this offering being made in connection with a busine acquisition or exchange offer?	ess combination transaction, such as a merger, $\qquad \qquad \qquad \qquad \qquad \boxed{Yes \ X}$ No					
Clarification of Response (if Necessary):						
11. Minimum Investment						
Minimum investment accepted from any outside inves	tor \$25,000 USD					
42 Salas Commonation						
12. Sales Compensation						
Recipient	Recipient CRD Number X None					
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number X None					
Street Address 1	Street Address 2					
City	State/Province/Country ZIP/Postal Code					
State(s) of Solicitation (select all that apply)	All States Foreign/non-US					
Check "All States†or check individual States	Thi states The states are the states and the states are the states					
13. Offering and Sales Amounts						
Total Offering Amount \$2,500,000 LIGD or 11-	ofinito					
Total Offering Amount \$2,500,000 USD or Inc	eninte					
Total Amount Sold \$2,500,000 USD						
Total Remaining to be Sold \$0 USD or Inc	lefinite					
Clarification of Response (if Necessary):						
14. Investors						
Select if securities in the offering have been or ma	by be sold to persons who do not qualify as accredited investors, and enter the					
number of such non-accredited investors who alre						
	ave been or may be sold to persons who do not qualify as accredited investors, ave 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.
Sales Commissions \$0 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.
\$200,000 USD X 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 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
COGNITION THERAPUTICS INC	/s/ Harold T. Safferstein	Harold T. Safferstein	President and Chief Executive Officer	2010-12-28

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.