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HEALTHCARE VENTURES VII LP Form SC 13D May 27, 2011

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

SCHEDULE 13D
Under the Securities Exchange Act of 1934
(Amendment No.__)*

RADIUS HEALTH, INC. (Name of Issuer)

Common Stock, par value \$.0001 per share (Title of Class of Securities)

None (CUSIP Number)

Jeffrey B. Steinberg HealthCare Ventures LLC 44 Nassau Street Princeton, New Jersey 08542 (609) 430-3900

(Name, Address and Telephone Number of Person Authorized to Receive Notices and Communications)

May 17, 2011 (Date of Event which Requires Filing of this Statement)

If the filing person has previously filed a statement on Schedule 13G to report the acquisition that is the subject of this Schedule 13D, and is filing this schedule because of §§240.13d-1(e), 240.13d-1(f) or 240.13d-1(g), check the following box.

Note: Schedules filed in paper format shall include a signed original and five copies of the schedule, including all exhibits. See §240.13d-7 for other parties to whom copies are to be sent.

(Continued on following pages)

(Page 1 of 18 pages)

The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

^{*} The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter disclosures provided in a prior cover page.

CUSI	P No.	None		13D	Page 2 of 18 Pages			
1	NAME OF REPORTING PERSON I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)							
2	HealthCare Ventures VII, L.P. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions) (a)							
3	SEC USE ONLY							
4	SOURCE OF FUNDS (see instructions)							
5	N/A CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) OR 2(e)							
6	CITIZENSHIP OR PLACE OF ORGANIZATION							
	Delav	ware	7 S	OLE VOTING POWER				
SHAF	BER (RES EFICI <i>A</i>		8 S	HARED VOTING POWER				
EACH REPO	ORTIN SON		9 S	,899,033 OLE DISPOSITIVE POWER				
WITH			10 S	HARED DISPOSITIVE POWER				
11	1,899,033 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON							
12	1,899,033 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES (see instructions)							
13	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)							
14	11.8% (see Item 5(a) herein) TYPE OF REPORTING PERSON (see instructions) PN							

¹ This Schedule 13D is being filed jointly by the Reporting Persons, as hereinafter defined. Such Reporting Persons expressly disclaim status as a "group" for purposes of this Schedule 13D.

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CUSI	P No.	None		13D	Page 3 of 18 Pages			
1	NAME OF REPORTING PERSON I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)							
2	HealthCare Partners VII, L.P. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions) (a) " (b) x							
3	SEC	See Footnote 1						
4	SOURCE OF FUNDS (see instructions)							
5	N/A CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) OR 2(e)							
6	CITI	TIZENSHIP OR PLACE OF ORGANIZATION						
	Dela	ware	7 S	OLE VOTING POWER				
SHAI	BER (RES EFICLA		8 0 S	HARED VOTING POWER				
EACI REPO	ORTIN		9 S	,899,033 OLE DISPOSITIVE POWER				
PERS WITH			10 S	HARED DISPOSITIVE POWER				
11	1,899,033 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON							
12	1,899,033 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES (see instructions)							
13	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)							
14	11.8% (see Item 5(a) herein) TYPE OF REPORTING PERSON (see instructions)							
	PN							

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CUSI	P No.	None	13D	Page 4 of 18 Pages			
1	NAME OF REPORTING PERSON I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)						
2		H. Cavanaugh, Ph.D. CK THE APPROPRIATE BOX IF A ME	MBER OF A GROUP (see instructions)	(.)			
				(a) · (b) x			
3	SEC I	USE ONLY		See Footnote 1			
4	SOURCE OF FUNDS (see instructions)						
5	N/A CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) OR 2(e)						
6	CITIZENSHIP OR PLACE OF ORGANIZATION						
	USA	7	SOLE VOTING POWER				
NUM	BER C)F	0				