#### Edgar Filing: MCF CORP - Form 4

| MCF CORP                   |                                       |               |                                                            |                                             |             |                                                            |                   |                                           |                                       |                        |  |
|----------------------------|---------------------------------------|---------------|------------------------------------------------------------|---------------------------------------------|-------------|------------------------------------------------------------|-------------------|-------------------------------------------|---------------------------------------|------------------------|--|
| Form 4                     |                                       |               |                                                            |                                             |             |                                                            |                   |                                           |                                       |                        |  |
| June 03, 2005              | 5                                     |               |                                                            |                                             |             |                                                            |                   |                                           |                                       |                        |  |
| FORM                       | <b></b>                               |               |                                                            |                                             |             |                                                            |                   |                                           |                                       | PPROVAL                |  |
|                            | UNITE                                 | D STATES      |                                                            | ITIES A<br>hington,                         |             |                                                            | NGE (             | COMMISSION                                | OMB<br>Number:                        | 3235-0287              |  |
| Check this                 |                                       |               |                                                            |                                             |             |                                                            |                   |                                           | Expires:                              | January 31,            |  |
| if no long<br>subject to   | STATEMENT OF CHANCES IN RENERICIAL OW |               |                                                            |                                             |             | LOW                                                        | <b>NERSHIP OF</b> | •                                         | 2005                                  |                        |  |
| Section 10                 |                                       | SECURITIES    |                                                            |                                             |             |                                                            |                   |                                           | Estimated average<br>burden hours per |                        |  |
| Form 4 or                  | •                                     |               |                                                            |                                             |             |                                                            |                   |                                           | response                              | •                      |  |
| Form 5                     |                                       | •             |                                                            |                                             |             |                                                            |                   | ge Act of 1934,                           |                                       |                        |  |
| obligation<br>may conti    |                                       |               |                                                            | •                                           | •           | - ·                                                        |                   | of 1935 or Sectio                         | n                                     |                        |  |
| See Instru                 |                                       | 30(h)         | of the Inv                                                 | vestment                                    | Compan      | y Act                                                      | of 19             | 40                                        |                                       |                        |  |
| 1(b).                      |                                       |               |                                                            |                                             |             |                                                            |                   |                                           |                                       |                        |  |
| (Drint or Tuno D           | (action case)                         |               |                                                            |                                             |             |                                                            |                   |                                           |                                       |                        |  |
| (Print or Type R           | (esponses)                            |               |                                                            |                                             |             |                                                            |                   |                                           |                                       |                        |  |
| 1. Name and A              | ddress of Reporti                     | ing Person *  | 2 Issuer                                                   | Name and                                    | Ticker or ' | Tradin                                                     | a                 | 5. Relationship of                        | F Reporting Per                       | son(s) to              |  |
|                            |                                       |               |                                                            | 2. Issuer Name <b>and</b> Ticker or Trading |             |                                                            |                   | Issuer                                    |                                       |                        |  |
|                            |                                       |               | •                                                          | MCF CORP [MEM]                              |             |                                                            |                   |                                           |                                       |                        |  |
|                            |                                       |               | 3. Date of Earliest Transaction                            |                                             |             |                                                            |                   | (Check all applicable)                    |                                       |                        |  |
| (Last)                     | (First)                               | (Middle)      |                                                            |                                             | ansaction   |                                                            |                   | X Director                                | 100                                   | Quinor                 |  |
| 600 CALIFORNIA STREET, 9TH |                                       |               | (Month/Day/Year)<br>06/03/2005                             |                                             |             |                                                            |                   | X_ Officer (give                          | title 10% Owner                       |                        |  |
| FLOOR                      |                                       | 21, 7111      | 00/03/20                                                   | 105                                         |             |                                                            |                   | below)                                    | below)                                |                        |  |
| 12001                      |                                       |               |                                                            |                                             |             |                                                            |                   | Chai                                      | irman and CEC                         | )                      |  |
| (Street)                   |                                       |               |                                                            | 4. If Amendment, Date Original              |             |                                                            |                   | 6. Individual or Joint/Group Filing(Check |                                       |                        |  |
|                            | Filed(Mon                             | th/Day/Year)  |                                                            |                                             |             | Applicable Line)<br>_X_ Form filed by One Reporting Person |                   |                                           |                                       |                        |  |
|                            |                                       | 4100          |                                                            |                                             |             |                                                            |                   |                                           | Aore than One Re                      |                        |  |
| SAN FRAN                   | CISCO, CA 94                          | 4108          |                                                            |                                             |             |                                                            |                   | Person                                    |                                       |                        |  |
| (City)                     | (State)                               | (Zip)         | Table                                                      | e I - Non-D                                 | erivative S | Securi                                                     | ties Ac           | quired, Disposed of                       | f, or Beneficia                       | lly Owned              |  |
| 1.Title of                 | 2. Transaction l                      |               |                                                            | 3.                                          | 4. Securi   |                                                            |                   | 5. Amount of                              | 6. Ownership                          |                        |  |
| Security                   | (Month/Day/Ye                         |               | on Date, if                                                | Transactio                                  |             |                                                            |                   | Securities<br>Beneficially                | Form: Direct                          | Indirect<br>Beneficial |  |
| (Instr. 3)                 |                                       | any<br>(Month | CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5) |                                             |             |                                                            |                   | -                                         | (D) or<br>Indirect (I)                | Ownership              |  |
|                            |                                       | (1.101111     | 2 uj, 1 cui)                                               | (1115111-0)                                 | (11154170)  | . und                                                      | .,                | Following                                 | (Instr. 4)                            | (Instr. 4)             |  |
|                            |                                       |               |                                                            |                                             |             | (A)                                                        |                   | Reported                                  |                                       |                        |  |
|                            |                                       |               |                                                            |                                             |             | or                                                         |                   | Transaction(s) (Instr. 3 and 4)           |                                       |                        |  |
|                            |                                       |               |                                                            | Code V                                      | Amount      | (D)                                                        | Price             | (msu. 5 and 4)                            |                                       |                        |  |
| Common<br>Stock            | 06/03/2005                            |               |                                                            | Р                                           | 5,000       | А                                                          | \$<br>1.2         | 2,182,650                                 | D                                     |                        |  |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

### Edgar Filing: MCF CORP - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>ofNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | Date               | Secur | ınt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
|                                                     |                                                                       |                                         |                                                             | Code V                                 | (A) (D)                                                                                                                 | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |                                                     |                                                                            |

# **Reporting Owners**

| Reporting Owner Name / Address                                                       |           | Relationships |                  |       |  |  |  |  |  |
|--------------------------------------------------------------------------------------|-----------|---------------|------------------|-------|--|--|--|--|--|
|                                                                                      | Director  | 10% Owner     | Officer          | Other |  |  |  |  |  |
| MERRIMAN D JONATHAN<br>600 CALIFORNIA STREET<br>9TH FLOOR<br>SAN FRANCISCO, CA 94108 | X         |               | Chairman and CEO |       |  |  |  |  |  |
| Signatures                                                                           |           |               |                  |       |  |  |  |  |  |
| D. Jonathan 00<br>Merriman 00                                                        | 5/03/2005 |               |                  |       |  |  |  |  |  |
| <u>**</u> Signature of                                                               | Date      |               |                  |       |  |  |  |  |  |

### Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. 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 number.