# 1125426

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

# FORM D



OMB API	PROVAL				
OMB Number:	3235-0076				
Expires: May 31, 2005					
Estimated aver	age burden				
hours per form 1.0					

SEC USE ONLY					
Prefix	Serial				
	1				
DATE REC	CEIVED				

Name of Offering ( check if this is an a	amendment and name has changed, and indicate change.)					
Convertible Note and Warrant Financia	ng	$\mathcal{F}_{\mathcal{F}_{\mathcal{F}_{\mathcal{F}_{\mathcal{F}_{\mathcal{F}}}}}}$				
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6)	□ ULOE.				
		Comparation (				
Type of Filing: ☐ New Filing ☐ Amen	dment	A STATE OF THE STA				
	A. BASIC IDENTIFICATION DATA					
1. Enter the information requested about t	he issuer	JUL 3 @ 2003 >>				
Name of Issuer ( check if this is an am	endment and name has changed, and indicate change.)	· // //				
Audible Magic Corporation						
Address of Executive Offices	Telephone Number (Including Area Code					
985 University Avenue, Suite 35	(408) 399-6405					
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code				
(if different from Executive Offices)	same	same				
Brief Description of Business						
Interactive radio/music identification by	usiness					
Type of Business Organization						
	d partnership, already formed	pecify):				
□ business trust □ limite	d partnership, to be formed	nn CESSEV				
	Month Year	- Ross				
Actual or Estimated Date of Incorporation	or Organization: 0 7 9 9	Actual Estimated JUL 3 1 2003				
	ion: (Enter two-letter U.S. Postal Service abbreviation for Sta	ote: JUL 3 1 2000				
· · · · · · · · · · · · · · · · · · ·	CN for Canada; FN for other foreign jurisdiction)	CIA THOMSON				
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### **GENERAL INSTRUCTIONS**

# Federal:

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

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#### 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 ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Ikezoye, Vance E. Business or Residence Address (Number and Street, City, State, Zip Code) Audible Magic Corporation, 985 University Avenue, Suite 35, Los Gatos, CA 95032 Check Box(es) that Apply: Promoter ☑ Executive Officer ☑ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Schrempp, James Business or Residence Address (Number and Street, City, State, Zip Code) Audible Magic Corporation, 985 University Avenue, Suite 35, Los Gatos, CA 95032 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Tomlinson, Timothy Business or Residence Address (Number and Street, City, State, Zip Code) Tomlinson Zisko Morosoli & Maser LLP, 200 Page Mill Road, Palo Alto, CA 94306 ☐ Beneficial Owner Check Box(es) that Apply: ☐ Promoter ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Pfeffer, Jeffrey Business or Residence Address (Number and Street, City, State, Zip Code) Graduate School of Business, Stanford University, Stanford, CA 94305-5015 Check Box(es) that Apply: ☐ Promoter ⊠ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Tierra del Oro, LLC Business or Residence Address (Number and Street, City, State, Zip Code) Fischer International Systems Corporation, 3584 Mercantile Avenue, Naples, FL 34104 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

						B. INFO	RMATI	ON ABO	UT OFFI	RING					
														Yes	No
1.	Has the i	ssuer sol	d, or de	oes the i	ssuer inte	nd to sell,	to non-ac	credited i	nvestors i	n this offe	ring?				X
			Ans	swer als	o in Appe	ndix, Col	umn 2, if	filing und	er ULOE.						
2.	What is t	he minin	num in	vestmer	nt that wil	l be accep	ted from a	any indivi	dual?					\$_N	/ <u>A</u>
														Yes	No
3.	Does the	offering	permit	t joint ov	wnership	of a single	unit?				•••••		•••••		$\boxtimes$
4.	or similal listed is a of the broset forth	r remune n associa ker or d the infor	ration ated pe ealer. mation	for solicerson or a lift more in for that	itation of agent of a than five	purchase: broker or	rs in conne dealer re is to be lis	ection wit gistered w	h sales of ith the SE	securities EC and/or	in the off with a sta	ering. If a te or state	ny commission person to be s, list the name aler, you may		
Full Na <b>N/A</b>	ame (Last:	name firs	t, if ind	lividual)											
Busine	ess or Resid	lence Ad	dress (1	Number	and Street	, City, Star	te, Zip Coo	le)							
Name	of Associa	ted Broke	er or De	ealer											
States:	in Which I	erson Li	sted Ha	as Solicit	ed or Inter	nds to Soli	cit Purcha	sers							
(Ch	eck "All S	ates" or	check is	ndividua	1 States)									□ All :	States
[AL				[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]			
[IL] [M] [R]	[IN] [NE]	[LA ] [N	\] V]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[M] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]		
	ame (Last		-	lividual)											· · · · · · · · · · · · · · · · · · ·
Busine	ess or Resid	ience Ad	dress (1	Number	and Street	, City, Sta	te, Zip Co	de)							
Name	of Associa	ted Brok	er or D	ealer											
States	in Which I	Person Li	sted Ha	as Solicit	ed or Inte	nds to Soli	cit Purcha	sers			<del>\ \ \</del>				
(Ch	eck "All S	tates" or	check i	ndividua	l States).									□ All	States
[AL [IL] [M] [RI]	[IN] [NE]	[[A N] [N	\] V]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full N	ame (Last	name firs	st, if inc	lividual)	-										
Busine	ess or Resi	dence Ad	ldress (1	Number	and Street	t, City, Sta	te, Zip Co	de)							
Name	of Associa	ted Brok	er or D	ealer	· · · · · ·										
States	in Which 1	Person I :	eted U	as Solici	ted or Inta	nds to Sal-	cit Purcha	Sers							
														□ All	States
[AI [IL] [M] [RI	] [IN [] [NE	[I.4 [N]	\] V]	[AR] [KS] [NH] [TN]	[СА] [КҮ] [NЛ] [ТХ]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

C. OFFERING FRICE, NUMBER OF INVESTORS, EATENSES AND USE C	FF	OCEED			
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 Tering Pri		Am	ount Already Sold
Debt	\$		00	\$	0
Equity	\$		0	\$	0
□ Common □ Preferred					
Convertible Securities (including warrants)	\$	362,2	50.00	\$	362,250.00
Partnership Interests	\$		0	\$	0
Other (Specify) Convertible Promissory Notes)	\$	1,035,0	00.00	\$	1,035,000.00
Total					1,397,250.00
Answer also in Appendix, Column 3, if filing under ULOE.					
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."		N			
		Number Investors		Do	Aggregate ollar Amount f Purchases
Accredited Investors		3		<b>\$</b>	1,397,250.00
Non-accredited Investors		0		\$	0
Total (for filings under Rule 504 only)		3		\$	1,397,250.00
Answer also in Appendix, Column 4, if filing under ULOE.					
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 offering		Type of Security		Do	ollar Amount Sold
Rule 505		0		\$	0
Regulation A		0		\$	0
Rule 504		0		\$	0
Total		0		\$	0
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.		•••••		\$	0
Printing and Engraving Costs				\$	0
Legal Fees			$\boxtimes$	\$	3,000.00
Accounting Fees				\$	0
Engineering Fees				\$	0
Sales Commissions (specify finders' fees separately)				\$	0
Other Expenses (identify) Finders fees				\$	0
Total			X	\$	3,000.00

Enter the difference between the aggregate offering price given in response to Part C - Question 4.a. This difference is the "acceds to the issuer."	adjuste	d gross		\$ <u>1,394,250.</u>
cate below the amount of the adjusted gross proceeds to the issuer used or proposed to of the purposes shown. If the amount for any purpose is not known, furnish an estimate box to the left of the estimate. The total of the payments listed must equal the acceeds to the issuer set forth in response to Part C - Question 4.b above.	ate an	d check		
		Payments to Officers, Directors & Affiliates		Payments to Others
Salaries and fees		\$		\$0
Purchase of real estate		\$0		\$ <u> </u>
Purchase, rental or leasing and installation of machinery and equipment		\$0		\$
Construction or leasing of plant buildings and facilities		\$0		\$0
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$ 0		<b>\$</b> 0
Repayment of indebtedness	_	\$		\$ 0
Working capital <sup>2</sup>		\$0	×	\$ <u>1,394,250.00</u>
Other (specify):		\$0		<b>\$</b> 0
		\$		\$0
Column Totals		\$	×	\$ <u>1,394,250.00</u>
Total Payments Listed (column totals added)		⊠ \$1,39	94,250.0	0

## D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature/	Date
Audible Magic Corporation	and Low	July 16, 2003
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Vance E. Ikezoye	President	

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)