FORM D

129574

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

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Prefix Serial	
Prefix Serial	ILY
	Serial
	V

Name of Offering (check if this is an a	mendment and name has chang	ged, an	nd indicate change.)			118
Series B Preferred Stock Financing - sa	le and issuance of Series B P	referr	ed Stock and Commo	on Stock issuable up	on conversion o	f Series B Preferred Stock
Filing Under (Check box(es) that apply):	☐ Rule 504.		Rule 505	Rule 506	☐ Section	4(6) ULOBIED (3)
Type of Filing:			New Filing	Œ	Amendmer	nt A
	A. BAS	IC ID	ENTIFICATION DA	TA		INA Y @ 2008
1. Enter the information requested abou	it the issuer					\
Name of Issuer (check if this is an ame	endment and name has changed	i, and i	indicate change.)			101
Arroyo Video Solutions, Inc. (formerly	Calypso Networks, Inc.)					15% 15%
Address of Executive Offices	(Number and S	treet, C	City, State, Zip Code)	Telephone Numbe	r (Including Are	a Code)
4473 Willow Road, Suite 220, Pleasanto	n, CA 94588			(925) 225-2111		
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, Stat	e, Zip	Code)	Telephone Number	r (Including Are	PROCESSED
Same as above.				Same as above.		
Brief Description of Business Interactive services infrastruction for v	ideo on demand.				20	JAN 2 8 2005
Type of Business Organization						THOMSON
⊠ corporation	☐ limited partnership, alread	dy forn	ned		□ other (please	spæiBIANCIAL
☐ business trust	☐ limited partnership, to be	forme	d			
Actual or Estimated Date of Incorporation	от Organization:	 0		<u>Year</u> 2003		
Indication of Incompanyion on Organizat	ione (Enton true letter IIC I	Dootol (Comisso obbroviotion f	or Stata:	☑ Actual	☐ Estimated
Jurisdiction of Incorporation or Organizat	ion: (Enter two-letter U.S. I CN for Canada: FN for			oi state.		DE

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 state 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.

SEC 1972 (2-97) 1 of



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	☐ Promoter	■ Beneficial Owner	Executive Officer	▼ Director	General and/or
Box(es) that	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	Managing Partner
Apply:					
Full Name (Last Sherer, W. Pau	name first, if individual)				
		Street, City, State, Zip Code)			
	•	ow Road, Suite 220, Pleasante	on, CA 94588		
Check	☐ Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or
Box(es) that					Managing Partner
Apply:	name first, if individual)				
Major, Robert	•				
	idence Address (Number and	Street, City, State, Zip Code)			
c/o Arroyo Vid	eo Solutions, Inc. 4473 Willo	ow Road, Suite 220, Pleasanto	n, CA 94588		
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
•	name first, if individual)				
Tanoury, Mark					
	idence Address (Number and	Street, City, State, Zip Code) quare, 3000 El Camino Real, I	Pala Alta CA 04306		
Check Boxes	Promoter	Beneficial Owner	Executive Officer	☑ Director	☐ General and/or
that Apply:	Li Fromotei	Ed Beneficial Owner	La Executive Officer	E Director	Managing Partner
	name first, if individual)		 	··	
Amdahl, Carl					
	idence Address (Number and I Management, 2420 Sand H	Street, City, State, Zip Code) Iill Road, Suite 200, Menlo Pa	rk, CA 94025		
Check Boxes that Apply:	☐ Promoter	⊠ . Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last Grosser, Adam	name first, if individual)		•		
	idence Address (Number and Capital, 70 Willow Road, S	Street, City, State, Zip Code) uite 200, Menlo Park, CA 940	025		
Check Boxes that Apply:	☐ Promoter	■ Beneficial Owner ■ Compare the second of the second o	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last DCM III, L.P.	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code) Iill Road, Suite 200, Menio Pa	ark CA 94025		
Check Boxes	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
that Apply:					Managing Partner
Full Name (Last Foundation Ca	name first, if individual) pital IV, L.P.				
	idence Address (Number and				
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		uite 200, Menlo Park, CA 94		. — <u>-,</u> . —	
Check Box(es) that	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Apply:					Managing Partner
	name first, if individual)				
TimeWarner V	entures, Inc.				
	idence Address (Number and				
c/o Time Warr	ner, Inc., 22000 AOL Way,	Ferrace Level, Dulles, VA 20	166		

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last Kelly, Kim D.	t name first, if individual)				
	idence Address (Number and eo Solutions, Inc., 4473 Wille	Street, City, State, Zip Code) ow Road, Suite 220, Pleasanto	on, CA 94588		
Check Box(es) that Apply:	Promoter	🗷 Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
	t name first, if individual)				·
	idence Address (Number and				
c/o Arroyo Vid	Promoter	ow Road, Suite 220, Pleasanto Beneficial Owner	Executive Officer	☐ Director	General and/or
Box(es) that Apply:	Li Promoter	☐ Beneficial Owner	Executive Officer	Li Director	Managing Partner
	name first, if individual)				
Yano, Art	idence Address (Number and	Street City State Zin Code)		 	
	,	ow Road, Suite 220, Pleasanto	on, CA 94588		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐. General and/or Managing Partner
	t name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code) ow Road, Suite 220, Pleasanto	on, CA. 94588		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
	name first, if individual)				
Bagby, Kathy	idence Address (Number and	Street City State Zin Code)			
		ow Road, Suite 220, Pleasanto	on, CA 94588		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
	t name first, if individual)				
George, Antho	<u>.* </u>	· · · · · · · · · · · · · · · · · · ·		·	
c/o Arroyo Vid		Street, City, State, Zip Code) ow Road, Suite 220, Pleasanto	on, CA 94588		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last	t name first, if individual)				
Business or Res	idence 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 (Las	t name first, if individual)				
Business or Res	idence 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	t name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			

•				В	. INFORM	IATION AB	OUT OFFE	RING				
t.	Has the issuer sold,	or does the issu	uer intend to					under ULOF			Yes N	0 <u>X</u>
2.	What is the minimum	m investment t	hat will be a	ccepted from	n any indivi	dual?		• • • • • • • • • • • • • • • • • • • •			\$	N/A
3.	Does the offering pe	rmit joint own	ership of a si	ingle unit?	•••••						Yes <u>X</u> N	0
4.	Enter the informati solicitation of purel registered with the S broker or dealer, you	nasers in conne SEC and/or wit	ection with : h a state or s	sales of sec states, list th	curities in the name of t	ne offering. he broker or	If a person	to be listed	is an associate	ed person or	agent of a b	oroker or dealer
Full	Name (Last name fir	st, if individua	1)		···							, _, _, _, _, _, _, _
Busi	ness or Residence Ad	dress (Numbe	r and Street,	City, State,	Zip Code)							
Nam	ne of Associated Brok	ter or Dealer							:			
	es in Which Person L											
,	eck "All States" or ch		-									
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
IMT		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] Full	[SC] Name (Last name fire	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
	Traine (Bast Hallie III)	, 11 marriada	•									
Busi	ness or Residence Ad	ddress (Numbe	r and Street,	City, State,	Zip Code)			· — — — — — — — — — — — — — — — — — — —				
Narr	ne of Associated Brok	er or Dealer										
State	es in Which Person L	isted Has Solic	ited or Inten	ds to Solici	t Purchasers							······································
(Che	eck "All'States" or ch	eck individual	States)									All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
ΙMΤ] [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
	Name (Last name fir	·									·	
Busi	ness or Residence Ac	dress (Numbe	r and Street,	City, State,	Zip Code)							
Nam	ne of Associated Brok	er or Dealer				- 						
State	es in Which Person L	isted Has Solic	ited or Inten	ds to Solici	t Purchasers							
(Che	eck "All States" or ch	eck individual	States)								· · · · · · · · · · · · · · · · · · ·	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]. [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$ 14,500,000	\$ 14,073,465
	Common Preferred	4	
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$ 14,500,000	\$ 14,073,465
	Answer also in Appendix, Column 3, if filing under ULOE.		· · · · · · · · · · · · · · · · · · ·
2.	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."		
		Number	Aggregate
		Investors	Dollar Amount of Purchases
	Accredited Investors	10	\$ 14,073,465
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	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	Dollar Amount
		Security	Sold
	Type of Offering		
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	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	+	□ \$
	Printing and Engraving Costs	ļ	\$
	Legal Fees		¥ \$ <u>40,000</u>
	Accounting Fees	!	D \$ <u>-</u>
	Engineering Fees	I	D \$
	Sales Commissions (specify finders' fees separately)		□ \$
	Other Expenses (Identify)	l	D \$
	Total	I	≤ \$40.000

b. Enter the difference between the aggregate offering price given in re			·
in response to Part C – Question 4.a. This difference is the "adjusted	i gross proceeds to the issuer"		\$ <u>14,460,000</u>
5. Indicate below the amount of the adjusted gross proceeds to the issuer use If the amount for any purpose is not known, furnish an estimate and of payments listed must equal the adjusted gross proceeds to the issuer set for	check the box to the left of the est	imate. The total of the n 4.b above.	
		Payment to Officers, Directors, & Affiliates	Payment To Others
Salaries and fees		S	□ s
Purchase of real estate		□ \$	
Purchase, rental or leasing and installation of machinery and equipment			
Construction or leasing of plant buildings and facilities		□ s	□ s
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) Repayment of indebtedness		S	□ s
Working capital	'	□ \$	\$
Other (specify):		□ \$	× \$14,460,000
Outer (specify).	···	□ \$	□ \$
		□ s	□ \$
Column Totals		□ s	\$14,460,000
Total Payments Listed (column totals added)		× \$ <u>14,460,0</u>	000
D. FED	ERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly as an undertaking by the issuer to furnish to the U.S. Securities and Exchange Conon-accredited investor pursuant to paragraph (b)(2) of Rule 502.			
Issuer (Print or Type)	Signature		Date
Arroyo Video Solutions, Inc.	I had P. I can	~	January 24, 2005
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Mark P. Tanoury	Secretary		

ATTENTION

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

	E. STA	TE SIGNATURE					
1. Is any party described in 17 CFR 230.262 pre	Yes	No 🗷					
	See Appendix, Co	olumn 5, for state response.					
2. The undersigned issuer hereby undertakes to such times as required by state law.	The undersigned issuer hereby undertakes to furnish to the state administrator of any state in which the notice is filed, a notice on Form D (17 CFR 239.500) at						
3. The undersigned issuer hereby undertakes to	The undersigned issuer hereby undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to offerees.						
The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.							
Issuer (Print or Type)		Signature	Date				
Arroyo Video Solutions, Inc.	Mal P. Tenner	January 2	4, 2005				
Name (Print or Type)		Title (Print or Type)					
Mark P. Tanoury		Secretary					

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

FORM 2400