-1-1FORM D UNITED STATES SECURITIES AND EXCHANGE COMMISSION /AL WASHINGTON, D.C. 20549 76 RECEIVED FORM D en hours per response.... APR 2 7 2005 NOTICE OF SALE OF SECURITIE SEC USE ONLY PURSUANT TO REGULATION D. SECTION 4(6), AND/OR Prefix Serial UNIFORM LIMITED OFFERING EXEMPTION DATE RECEIVED Name of Offering (check if this is an amendment and name has changed, and indicate change.) Sale of Series B Preferred Stock Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ত Rule 506 ☐ Section 4(6) ☐ ULOE Type of Filing: E New Filing Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Calhoun Vision, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (510) 524-2684 2555 East Colorado Blvd., Suite 400, Pasadena, CA 91107 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Brief Description of Business Develop and commercialize light-adjustable materials Type of Business Organization ☐ limited partnership, already formed ■ corporation □ other (please specify):

☐ limited partnership, to be formed

Actual or Estimated Date of Incorporation or Organization:

Month

Year [0][3] [9][7]

■ Actual □ Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service

Abbreviation for State: CN for Canada;

FN for other foreign jurisdiction)

[C][A]

GENERAL INSTRUCTIONS

☐ business trust

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.

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 predicted on the filing of a federal notice.

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. ■ Beneficial Owner Check Box(es) that Apply: ☐ Promoter Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Daniel Schwartz Business or Residence Address (Number and Street, City, State, Zip Code) c/o Calhoun Vision, Inc., 2555 East Colorado Blvd., Suite 400, Pasadena, CA 91107 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) John Maynard Business or Residence Address (Number and Street, City, State, Zip Code) c/o Calhoun Vision, Inc., 2555 East Colorado Blvd., Suite 400, Pasadena, CA 91107 Executive Officer ☐ Promoter ☐ Beneficial Owner ☐ Director ☐ General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Shiao Chang Business or Residence Address (Number and Street, City, State, Zip Code) c/o Calhoun Vision, Inc., 2555 East Colorado Blvd., Suite 400, Pasadena, CA 91107 Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Cosmetic Laser Eye and Refractive Centers of America Business or Residence Address (Number and Street, City, State, Zip Code) c/o Jack Kavanaugh 12221 Benmore Terrace, Los Angeles, CA 90049 Check Box(es) that Apply: ☐ Promoter ■ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) The Herb and Lani Alpert Revocable Trust Business or Residence Address (Number and Street, City, State, Zip Code) c/o Werner F. Wolfen, Irell & Manella LLP, 1800 Ave. of the Stars, Ste 900, Los Angeles, CA 90047

Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
The Moss Trust Dated 1	2/16/1999				
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
c/o Werner F. Wolfen, Irell &	Manella LLP, 1800	Ave. of the Stars, Ste 900, Lo	s Angeles, CA 90047		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Jack Kavanaugh	6.				
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
12221 Benmore Terrace, Los	Angeles, CA 90049				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
John D. Baxter	D.				
Business or Residence Address c/o Calhoun Vision, Inc., 2555		eet, City, State, Zip Code) d., Suite 400, Pasadena, CA 91	1107	•	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Werner F. Wolfen	e .				
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
Irell & Manella LLP, 1800 Av	e. of the Stars, Ste	900, Los Angeles, CA 90047			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Robert H. Grubbs	•				
Business or Residence Address c/o Calhoun Vision, Inc., 2555		et, City, State, Zip Code) d., Suite 400, Pasadena, CA 91	1107		

						B. II	NFORMAT	ΓΙΟΝ ABO	UT OFFE	RING	:				
1.	Has the	issuer sold	l, or does the	e issuer inte											Yes No .□ 🗷
2.	What is	the minim	um investm	ent that wil	l be accepte	ed from any	individual ^e	?		***************************************	•••••			\$	50,000.00 Yes No
Answer also in Appendix, Column 2, if filing under ULOE.											. 🗆 🗷				
4.	purchase and/or v	ers in conn vith a state	ection with or states, lis	sales of sec st the name	ourities in the	ne offering. er or dealer	If a person	to be listed	l is an assoc	ciated perso	n or agent	of a broker	or dealer regis	stered with th	e SEC
Full	Name (L	ast name f	irst, if indiv	idual)											
N/A	– No sol	icitation u	ındertaken	in connect	ion with th	is offering									
Busi	ness or F	Residence A	Address (Nu	mber and S	Street, City,	State, Zip	Code)		,			-			
Nam	ne of Asso	ociated Bro	oker or Deal	er											
State	es in Whi	ich Person	Listed Has												
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	(Check "A [AZ] [IA] [NV] [SD]	II States" o [AR] [KS] [NH] [TN]	r check indi [CA] [KY] [NJ] [TX]	ividual Stat [CO] [LA] [NM] [UT]	es) [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]		All States
Full	Name (L	ast name f	irst, if indiv	idual)											
Busi	ness or R	Residence /	Address (Nu	mber and S	Street, City,	State, Zip (Code)								

Name of Associated Broker or Dealer

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	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 \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$_8,000,000	\$_1,800,000
	☐ Common ☑ Preferred (convertible)		
	Convertible Securities (including warrants) (see above)	\$0	\$0
	Partnership Interests	\$0	\$0
	Other (Specify)	\$0	\$0
	Total	\$ 8,000,000	\$_1,800,000
	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 Dollar Amount
	Accredited Investors	Investors	of Purchases \$_1,800,000
	Non-accredited Investors	0	\$ <u>0</u>
	Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>
	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 offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$
	Regulation A	N/A	\$
	Rule 504	N/A	\$
	Total	N/A	\$
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	.,,	🗅 \$0
	Printing and Engraving Costs		🗆 \$0
	Legal Fees		E \$ 70,000
	Accounting Fees		D \$0
	Engineering Fees		🗆 \$0
	Sale Commissions (specify finders' fee separately)		D \$0
	Other Fundament (translated at the next of resolutions and		П

Total			5 70,000
b. Enter the difference between the aggregate offering price gi expenses furnished in response to Part C - Question 4.a. This cissuer."	difference is the "adjusted gross proceeds to the	\$	1,730,000
Indicate below the amount of the adjusted gross proceeds to th purposes shown. If the amount for any purpose is not known, estimate. The total of the payments listed must equal the adjust to Part C - Question 4.b above.	furnish an estimate and check the box to the left of the		
		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		□ \$	□\$
Purchase of real estate		□ \$	□ \$
Purchase, rental or leasing and installation	□ \$	□\$	
Construction or leasing of plant buildings	□ \$	□ \$	
Acquisition of other business (including may be used in exchange for the assets of	S	□\$	
Repayment of indebtedness		□ \$	S
Working capital		□ \$	□ \$ <u>1,730,000</u>
		□ \$ <u></u>	<u>\$</u>
		□ \$	
Total Payments Listed (column totals add	ded)		
	D. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed by the undersign undertaking by the issuer to furnish to the U.S. Securities and Exemples are called investor pursuant to paragraph (b)(2) of Rule 502.	hange Commission, upon written request of its staff, the		
Issuer (Print or Type) Calhoun Vision, Inc.	Signature & Sul	Date April	22, 2005
Name of Signer (Print or Type) JOHN MAYNAM	Title of Signer (Print or Type) CRIEF FINANZIAC	OFFICER	
	·		
Intentional misstatements or omi	ATTENTION ssions of fact constitute federal criminal violations. (S	ee 18 U.S.C. 1001.)	

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?

Yes No

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. 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) Calhoun Vision, Inc.		Signature	hyd	Date April 22, 2005
Name (Print or Type)	MAYNAND	Title (Print or Type)	HEF FINANT	THE OPPICER

Instruction

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 of bear typed or printed signatures.

A	\P	P	E	N	D	IX

1	Intend to non-a investor	1 to sell ceredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		under St (if ye explat waiver	5 lification tate ULOE s, attach nation of granted) E-Item 1)			
State	Yes	No	(Approx.)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		х				0	0		X
AK		х				0	0		Х
AZ		х				0	0		х
AR		х				0	0		Х
CA		х	Series B Preferred	8	\$1,650,000	. 0	0		Х
co ·		х	Series B Preferred	1	75,000	0	0		Х
ст		х				0	0		х
DE		х				0	0		х
DC		х				0	0		Х
FL		x				0	0		Х
GA		х				0	0		X
Hĭ		х				0	0		Х
ID.		х				0	0		Х
IL		х				0	0		X
IN		х				0	0		Х
lA		х				0	0		Χ.
KS		х				0	0		X
KY		х				0	0		Х
LA		Х				0	0		Х
ME		х				. 0	0		х
MD		х				0	0		Х
MA		Х				0	0		х
MI		Х				0	0		х
MN		Х				0	0		Х
MS		Х				0	0		X
МО		х				0	0		Х

APPENDIX

1	Intend to non-a investor	to sell corredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Amou	dee of investor and in purchased in State Part C-Item 2)*		under St (if yes explar waiver	5 lification ate ULOE s, attach nation of granted) E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No .	
MT		х			····	0	0		х	
NE		Х				0	0		Х	
NV		Х		1	\$50,000	0	0		x	
NH		X,				0	0		х	
NJ		х				0 .	0		Х	
NM		¹ X ,				0	0		X	
NY		х				0	0		Х	
NC		х	·			0	0		Х	
ND		х				. 0	0		Х	
ОН		X				0 .	0		X	
ок		Х			:	0	0		Х	
OR		Х				0	0		Х	
PA		X				0	0		х	
RI		x				. 0	0		X	
SC		Х	1			0	0		Х	
SD		Х				0	0		X	
TN		X				0	0		Х	
TX		x	ı			0	0		Х	
UT	·	X				0	0		Х	
VT		Х				0	0		Х	
VA		Х				0	0		Х	
WA		Х				0	0		X	
WV		Х				0	0		Х	
WI		X				0 ·	0		X	
WY		х				0	0	·	Х	
PR		X				0	0		χ .	