FORM D = 70 = 1200 - 1

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

OMB APPROVAL								
OMB Number:	3235-0076							
Expires:	May 31, 2005							
Estimated avera	ige burden							
hours per respo	nse16.00							

122793

SE	C USE O	NLY
Prefix		Serial
	DATE RECE	IVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.) Entropic Communications, Inc. Series B Preferred Stock financing	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
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.) Entropic Communications, Inc.	03055818
Address of Executive Offices (Number and Street, City, State, Zip Code) 9276 Scranton Road, Ste. 200, San Diego, CA 92121	Telephone Number (Including Area Code) (858) 625-3200
Address of Principal Business Operations (if (Number and Street, City, State, Zip Code) different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Fabless semiconductor company	
Type of Business Organization	**************************************
✓ corporation       ☐ limited partnership, already formed       ☐ other (p         ☐ business trust       ☐ limited partnership, to be formed	lease specify): PROCESSED
Actual or Estimated Date of Incorporation or Organization: Month Vear Q 1 Setimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State;	APR 21 2003
CN for Canada, FN for other foreign jurisdiction)	THOMSON

#### **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 fil appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicate the filing of a federal notice.

		A. BASIC II	PENTIFICATION DATA		
2. Enter the information requ	uested for the follow	ring:			
<ul> <li>Each promoter of the</li> </ul>	ssuer, if the issuer h	as been organized within th	ne past five years;		
<ul> <li>Each beneficial owner</li> </ul>	having the power to	o vote or dispose, or direct t	the vote or disposition of, 10	% or more of a cla	ss of equity securities of the issuer.
<ul> <li>Each executive officer</li> </ul>	and director of corp	porate issuers and of corpor	ate general and managing pa	artners of partnershi	p issuers;
Each general and man	aging partner of par	tnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Gurantz, Itzhak					
Business or Residence Address	•				
9276 Scranton Road, Suite 2	200, San Diego, C				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Wardani, Ladd					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
9276 Scranton Road, Suite	200, San Diego, C	CA 92121			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (East name first, if i	ndividual)				
Monk, Anton					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)	<del></del>		
9276 Scranton Road, Suite 2	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				•
Kreutz, Paul					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
4365 Executive Drive, Suite	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (East name first, if i	ndividual)				
Yassini, Rouzbeh	ŕ				
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
300 Brickstone Square, And	lover, MA 01810-	1435			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Spiegel, Leo					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
11512 El Camino Real, Suit	te 215, San Diego	, CA 92130			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)		· · · · · · · · · · · · · · · · · · ·		
Walecka, John					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)	The second secon		
3000 Sand Hill Road, Build					

		A:BASIC:II	DENTIFICATION BATA		
2. Enter the information req	uested for the follow	ving:			
Each promoter of the	issuer, if the issuer l	has been organized within th	he past five years;	•	
<ul> <li>Each beneficial owner</li> </ul>	r having the power t	o vote or dispose, or direct	the vote or disposition of, 10	% or more of a cla	ss of equity securities of the issuer.
<ul> <li>Each executive office</li> </ul>	r and director of cor	porate issuers and of corpor	rate general and managing pa	artners of partnersh	ip issuers;
<ul> <li>Each general and mar</li> </ul>	aging partner of par	rtnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	individual)	· · · · · · · · · · · · · · · · · · ·			
Baruch, Thomas					
Business or Residence Address					
One Embarcadero Center, S	Suite 3250, San Fr	ancisco, CA 94111			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Mission Ventures					
Business or Residence Address 11512 El Camino Real, Sui					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (East name first, if i	ndividual)				
Redpoint Ventures					
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			
3000 Sand Hill Road, Build	ling 2, Suite 290,	Menlo Park, CA 94025			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
CMEA Ventures					
Business or Residence Address	•				
One Embarcadero Center, S		ancisco, CA 94111			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (East name first, if i	ndividual)				
Business or Residence Address	(Number and Stree	t, 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 i	ndividual)		***************************************		
Business or Residence Address	(Number and Stree	t, 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 i	ndividual)		e de fonde		
Business or Residence Address	(Number and Stree	t, City, State, Zip Code)			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

				:::::B.1	NFORMA	TION AB	out off	ering :					
1. Has th	e issuer sol	d, or does	the issuer	intend to se	ll, to non-a	ccredited in	nvestors thi	is offering?				Yes	No ⊠
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors this offering?  Answer also in Appendix, Column 2, if filing under ULOE.													
2. What is the minimum investment that will be accepted from any individual?									\$ 0.00				
									Yes	No			
<ul><li>3. Does the offering permit joint ownership of a single unit?</li><li>4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any</li></ul>										Ш			
If a por standard broke	nission or person to	similar re be listed is e name of you may s e first, if in	munerations an associate the broke tet forth the	n for solic iated perso r or dealer.	citation of n or agent If more th	purchase of a broke an five (5	rs in conn r or dealer ) persons t	ection with registered o be listed	sales of se with the S	ective or indi- ecurities in the EC and/or valued person	he offering. with a state		
	r Residence				City, State,	Zip Code)	·					· ·	
N C A	1r	· · · · · · · · · · · · · · · · · · ·	1 .										
Name of A	ssociated I	sroker of L	Jealer										
	Vhich Perso				s to Solicit	Purchasers	; ;					——— □All S	tates
AL	AK	AZ	AR	<b>S</b>	СО	CT	DE	DC	FL	GA	н		
X	IN	IA	KS	KY	LA	ME	MD	MA	M	MN	MS	МО	
MT	NE	NV	NH	ĮП	NM	NY	NC	ND	ОН	ОК	OR	PA	
RI	SC	SD	TN	TX	UT	VT		WA	WV	WI	WY	PR	
Full Name							كنع	نت			لننا	***	
i un ivame	(Last name	, 11136, 11 111	aividuai)										
<u> </u>	D 11			10		<del></del> .							
Business o	r Kesidence	Address (	Number a	nd Street, C	ity, State, 2	Zip Code)							
Name of A	ssociated F	Broker or F	Dealer							· · · · · · · · · · · · · · · · · · ·	· 		
rame of 1	Socialed L	FORCE OF E	curor										
	hich Perso 'All States"				s to Solicit	Purchasers						☐ All S	States
AL	AK	AZ	AR	CA	СО	СТ	DE	DC	FL	GA	н		
IL	ĪN	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО	
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA	
RI	sc	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR	
Full Name	(Last name							·					
Business o	r Residence	e Address (	(Number a	nd Street, C	City, State,	Zip Code)							
NI C 4	ssociated E	> 1											
Name of A	ssociated E	Broker of L	Jealer										
	Vhich Perso				s to Solicit	Purchasers	3		· · ·		[		States
AL	All States	AZ	AR	CA	СО	СТ	DE	DC	FL	GA	н		
IL	[N]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	мо	
MT	NE	NV	NH	NJ	NM	NY	NC NC	ND	ОН	OK	OR	PA	
RI	sc	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR	

## 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 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	\$ 0.00	\$_0.00
	Equity	\$30,000,000.00	\$ 24,500,003.28
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$0.00	\$ 0.00
	Partnership Interests	\$0.00	\$ 0.00
	Other (Specify)	\$ 0.00	\$ 0.00
	Total		\$ 24,500,003.28
	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 Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	13	\$ 24,500,003.28
	Non-accredited Investors	0	\$ 0
	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 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
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	•	\$
	Total		\$ <u>·</u>
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		\$_0.00
	Printing and Engraving Costs		\$ 0.00
	Legal Fees	$\boxtimes$	\$ <u>125,000.00</u>
	Accounting Fees		\$
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Finders' fees		\$ 300,000.00
	Total	 🖂	s 425,000.00

C OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND US	e of proceeds	
b. Enter the difference between the aggregate offering response to Part C — Questi total expenses furnished in response to Part C — Question 4.a. This difference is the "adjus proceeds to the issuer."	ted gross	\$ 29,575,000.00
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an esting check the box to the left of the estimate. The total of the payments listed must equal the adjust proceeds to the issuer set forth in response to Part C - Question 4.b above.	nate and	
	Payments to Officers, Directors, & Affiliates	
Salaries and fees		0 \$1,200,000.00
Purchase of real estate	<b>\$</b> 0.00	\$ 0.00
Purchase, rental or leasing and installation of machinery and equipment	<b>\$</b> 750,000.00	□ \$ 0.00
Construction or leasing of plant buildings and facilities	<b>⋈</b> \$ 750,000.00	\$ 0.00
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)	□ \$ 0.00	□ \$ 0.00
Repayment of indebtedness	S 0.00	<b>□</b> \$ 2,125,000.00
Working capital		\$ 0.00
Other (specify): Product development and support activities		\$ 0.00
	<b>\$</b> 0.00	<u></u> \$ 0.00
Column Totals	<b>■</b> \$ 28,800,000.0	<u>0</u>
Total Payments Listed (column totals added)	⊠ \$ <u>_</u> 3	30,000,000.00
B. FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If thi signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Coi information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Ru	nmission, upon writ	
Issuer (Print or Type) Entropic Communications, Inc.		ate pril <b>&amp;_</b> , 2003
Name of Signer (Print or Type)  Itzhak Gurantz  Title of Signer (Print or Type)  President and Chief Executive Officer		

-ATTENTION-

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

# APPENDIX

1	Intend to non-ac investors (Part B-	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State  (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
Chata	Vas	N.T.o.		Number of Accredited		Number of Non-Accredited			
State AL	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AK									
AZ									
AR		_							
CA				9	\$17,250,002.37				
СО									
СТ									
DE									
DC						-			
FL						,			
GA									
НІ							<u> </u>		
ID									
IL				1	\$3,000,000.22		<u></u>		
IN									
IA									
KS									
KY		_							
LA		_							
ME									
MD									
MA		_							
MI				1	\$3,000,000.22				!
MN							<u> </u>		
MS		_							

### APPENDIX 2 3 1 4 5 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach explanation of to non-accredited offering price Type of investor and investors in State offered in state amount purchased in State waiver granted) (Part B-Itern 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited State Yes No **Investors** Amount **Investors** No Amount Yes MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TXUT VT VA \$750,000.43 WA WV WI

1	2	2	3	4				5		
								Disquali	fication	
			Type of security					under Sta	te ULOE	
	Intend		and aggregate						attach	
	to non-ac		offering price	•	Type of investor and				ition of	
	investors		offered in state		amount purchased in State				waiver granted)	
	(Part B-	Itern 1)	(Part C-Item 1)		(Part C-Item 2)			(Part E-Item 1)		
	ļ			Number of		Number of				
				Accredited		Non-Accredited				
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
WY										
							·	<del> </del>		
PR						-				