FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMPASSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION B, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

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hours per response...... 1
SEC USE ONLY

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OMB APPROVAL

Prefix

OMB Number:

Expires:

Serial

3235-0076

May 31, 2005

DATE RECEIVED



Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series A Preferred Stock Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ☐ ULOE Type of Filing: New Filing Amendment BASIC IDENTIFICATION DATA A. 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Musambi Corporation Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 2450 El Camino Real, Suite 200 Palo Alto, CA 94306-1706 650-213-8889 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different Telephone Number (Including Area Code) from Executive Offices) Brief Description of Business Internet Application Performance Management Type of Business Organization corporation limited partnership, already formed limited partnership, to be formed business trust other (please specify): Month Year 2 0 1 Actual Actual or Estimated Date of Incorporation or Organization: Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State: CN for Canada; FN for other foreign jurisdiction) 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.

	eng jere Ang ing Pangayar Propinsi Marin Ang ing Pangayar	A. BASIC ID	ENTIFICATION DATA		
Each beneficial ownEach executive office	e issuer, if the issuer having the power to	as been organized within the o vote or dispose, or direct the porate issuers and of corporate	e vote or disposition of, 10%		f equity securities of the issuer; suers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Wongfratris Investment Co	mpany c/o Y. Hon	Wong, Partner			
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
51 Jordan Place, Palo Alto,	CA 94303			···	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Che Family Trust dated 1/1	8/95 c/o Her-Daw C	Che TTEE			
Business or Residence Addre	,	et, City, State, Zip Code)			
19976 Price Ave., Cupertino	,CA 95014-3339				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Greylock XI Limited Partn					
Business or Residence Addre	-	et, City, State, Zip Code)			
880 Winter Street, Walthan	n, MA 02451-1465				· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
The Hwang Family Trust 8.	/1/02 c/o Ching-Fa I	Hwang			
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
10703 Magdalena Rd., Los	Altos Hills, CA 9402	4			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
InterWest Partners VIII, L	.Р.				
Business or Residence Addre		•			
2710 Sand Hill Rd. 2nd Floo	r, Menlo Park, CA 9	24025			<u>.</u>
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Acorn Campus Fund II LP			,		
Business or Residence Addre		et, City, State, Zip Code)			
6 Results Way, Cupertino,	CA 95014				•
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, is	f individual)				
DeFilipps, Thomas C.					
Business or Residence Addre	•	• • • • • • • • • • • • • • • • • • • •			
Wilson Sonsini Goodrich &					
	(Use blank	sheet, or copy and use add	litional copies of this sheet	, as necessary)	

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Che, Her-Daw	`individual)				
Business or Residence Address	ss (Number and Street	, City, State, Zip Code)			
19976 Price Ave., Cupertino	,CA 95014-3339	_			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Hwang, Ching-Fa					
Business or Residence Address					
10703 Magdalena Rd., Los A	Altos Hills, CA 94024				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Thau, Richard	·	·			
Business or Residence Address	ss (Number and Street	, City, State, Zip Code)			
1016 Dartmouth Lane, Los	Altos, CA 94024				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Bowsher, Steven					
Business or Residence Address	ss (Number and Street	, City, State, Zip Code)			
InterWest Partners, 2710 Sa	ınd Hill Rd. 2 nd Flooi	r, Menlo Park, CA 9402	5		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Wong, Ying-Hon					
Business or Residence Addres	ss (Number and Street	, City, State, Zip Code)			
51 Jordan Place, Palo Alto,	CA 94303				
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	ss (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 Addres	ss (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	ss (Number and Street	, City, State, Zip Code)			
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		• .			В.	INFOR	MATION .	ABOUT OI	FFERING				
Some size of the migrature of the continuous or agreement of the state of the continuous or agreement of the continuous or agreement who has been or will be paid or given, directly or indirectly any commission as similar or substance of several persons or significant or politications of persons in the listed are associated persons or significant or significant or substance of several persons or such as the continuous of such a brocker or dealer. (If more obtains the color persons to the listed are associated persons of such a brocker or dealer, you may set forth the information for that broker or dealer. (If more obtains the color persons to the listed are associated persons of such a brocker or dealer, you may set forth the information for that broker or dealer. (If more obtains the color persons to the listed are associated persons of such a brocker or dealer, you may set forth the information for that broker or dealer. (If more obtains the color persons to such a brocker or dealer, you may set forth the information for that broker or dealer. (If more obtains the color persons to such a brocker or dealer, you may set forth the information for that broker or dealer. (If more obtained the color persons to such a brocker or dealer, you may set forth the information for that broker or dealer. (If more obtained the color persons to such a brocker or dealer.) All States Color Color	1. Ha	· · · · · · · · · · · · · · · · · · ·											
	2. W	What is the minimum investment that will be accepted from any individual?									-		
Persummeration for solicitation of purchasers in connection with sales of securities in the offering. If a person to the issed is an associated person or age of a broker or dealer rolls when the SEC and/or with sales or stack, list he name of the broker or dealer. Times the flow of the information for that broker or dealer only. Full Name (Last name first, if individual)	3. Do	es the offering p	ermit joint ov	vnership of a	single unit?								
Business or Residence Address (Number and Street, City, State, Zip Code)	тег рег tha	nuneration for so rson or agent of a in five (5) person	licitation of p broker or dea	urchasers in a	connection v d with the SE	vith sales of s EC and/or wit	ecurities in th h a state or st	ne offering. I ates, list the	If a person to l name of the b	oe listed is ar roker or dea	n associated ler. If more		
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individuals States Lal [Ra] [Ra	$\overline{}$		rst, if individ	ıal)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	Business	or Residence A	ddress (Num	per and Stree	t, City, State	, Zip Code)				·	· · · · · · · · · · · · · · · · · · ·		
Check "All States" or check individuals States CAI COJ CTJ CDE CDC CFL GAJ CDJ CDJ	Name of	Associated Bro	ker or Dealer	-									
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [IMA] [MI] [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] [WA] [WV] [WI] [WY] [PR] [WY] [PR] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WV] [WV] [WY] [PR] [WY] [PR] [WY] [PR] [WY] [WY] [WY] [WY] [WY] [WY] [WY] [WY	States in	Which Person I	isted Has So	licited or Inte	ends to Solic	it Purchasers							
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Full Name (Last name first, if individual)	[IL]	[IN]	. [IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
Business or Residence Address (Number and Street, City, State, Zip Code)	[MT	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
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All States Check "All States" or check individuals States All St	Name of	Associated Bro	ker or Dealer										
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Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individuals States)	[MT	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individuals States)	[RI]	[SC]	[SD]	[TN]	[TX]	[TU]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individuals States)	Full Nan	ne (Last name fir	rst, if individu	ıal)			"						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individuals States)	Business	or Residence A	ddress (Numl	per and Stree	t, City, State	, Zip Code)							
(Check "All States" or check individuals States)	Name of	Associated Bro	ker or Dealer		•								
[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]	States in	Which Person I	isted Has So	licited or Inte	ends to Solic	it Purchasers			,				
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[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]	[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]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	[MT] [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	[RI]	[SC]	[SD]								[WI]	[WY]	[PR]

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 \(\subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amou	int Already
	Type of Security	Offering Price	Aimou	Sold
	Debt	\$0.00_	\$	0.00
	Equity	\$ <u>6,740,500.00</u>	\$ <u>6</u>	,740,500.00
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$0.00	\$	0.00
	Partnership Interests	\$	\$	
	Other (Specify)	\$	\$	
	Total	\$ 6,740,500.00	\$ <u>6</u> .	740,500.00
	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."		Ag	gregate
		Number Investors	Dolla	r Amount Purchase
	Accredited investors	17	\$ <u>6,</u>	740,500.00
	Non-accredited Investors	0	\$	0
	Total (for filings under Rule 504 only)	-	\$	
3.	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	Dolla	ır Amount
	Type of Offering	Security		Sold
	Rule 505	0	\$	0.00
	Regulation A	0	\$	0.00
	Rule 504		\$	0.00
	Total	0	\$	0.00
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.			
4.	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		\$	
4.	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.		\$ \$	
4.	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			25,000.00
4.	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		\$	
4.	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 Legal Fees		\$ \$	25,000.00
4.	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 Legal Fees Accounting Fees		\$ \$	25,000.00
4.	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 Legal Fees Accounting Fees Engineering Fees		\$ \$	25,000.00

	C.	OFFERING PI	RICE, NUMBER O	F INVESTORS	, EXPENSES ANI	D USE OF I	PROCEEDS		
total ex	er the difference between the difference betw	response to Part C -	Question 4.a. This	difference is the	"adjusted gross	•		\$ <u>6,71</u>	<u>5,500.00</u>
the pur left of t	e below the amount of poses shown. If the a the estimate. The tot response to Part C	amount for any purpetal of the payments l	ose is not known, fur isted must equal the	nish an estimate	and check the box to	o the r set			
						Officers	ments to , Directors & ffiliates		ents To hers
Salarie	s and fees					🔲 \$	0.00	S	0.00
Purcha	se of real estate					🗆 \$	0.00	□ s	0.00
Purcha	se, rental or leasing	and installation of n	nachinery and equip	ment		🔲 \$	0.00	□ s	0.00
Constr	uction or leasing of	plant buildings and	acilities	•••••	••••••	🗌 \$	0.00	□ s	0.00
	ition of other busine exchange for the as					🗆 \$	0.00	□ \$	0.00
Repayr	nent of indebtedness	s				🔲 s	0.00	□ s	0.00
Workir	ng capital			••••		🔲 s	0.00	∑ \$ <u>6,7</u>	5,500.00
Other (specify):						🗆 s	0.00	□ s	0.00
Column Totals						🗆 s	0.00	 \$ <u>6,7</u>	5,500.00
T	otal Payments Listed	d (column totals add	ed)			·	S <u>6,71</u>	5,500.00	
·····		ng kalangan di	D. F	EDERAL SIGN	NATURE		· .		
undertaking b	s duly caused this not by the issuer to furnis vestor pursuant to par	h the U.S. Securities	and Exchange Comm	nission, upon writ					
ssuer (Prin	t or Type)		Signature			Date			 -
Musambi Co			Moma		lyers	May 1, 2003			
Name of Sig Thomas C. I	ner (Print or Type)	Title of Signer (Presented Secretary	rint or Type)	//				
- Homas C. L			<u> </u>					F.WW.	
									•
		<u></u>	A	TTENTIO:	N				
	Intentional	Misstatements or C	missions of Fact C	Constitute Feder	al Criminal Violat	ions. (See	18. U.S.C. 100	1.)	