UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

AUG 1 1 2003

RECEIVED

OMB Number: 3235-0076 Éxpires: November 30, 2001 Estimated average burden

hours per form

NOTICE OF SALE OF SECURITIES	CRITATION	SEC USE	EONLY
PURSUANT TO REGULATION D. 155 69 SECTION 4(6), AND/OR	D#		Serial
UNIFORM LIMITED OFFERING EXEMPTION		DATE RE	CEIVED

Name of Offering (L) check if this is	s an amendment and name h	ias changed, and indi	icate ch	ange.)		
Series D Preferred Stock Financir	g					
Filing Under (Check box(es) that app	ly): ☐ Rule 504	☐ Rule 505	×	Rule 506	☐ Section 4(6)	☐ ULOE
	_				` '	
Type of Filing: New Filing	☐ Amendment					
	A. BASIC	C IDENTIFICATION	ON DA	ГА		
1. Enter the information requested a	oout the issuer					
Name of Issuer (check if this is	an amendment and name h	as changed, and indi	icate ch	ange.)		
Ingenuity Systems, Inc.		0 /		<i>C</i> ,		
Address of Executive Offices	(Number and Stre	et, City, State, Zip (Code)	Telephone N	lumber (Including Ar	ea Code)
1565 Charleston Road, Mountain			<i>'</i>	408/967-77	, -	,
Address of Principal Business Operat		et, City, State, Zip C	Code)	Telephone N	lumber (Including Ar	ea Code)
(if different from Executive Offices)	•	, , , , ,	'	•	`	,
Brief Description of Business						
Database management software	for pharmaceutical and b	piotechnology com	panies			
J	•	0,			E	AUG 12 2003
Type of Business Organization					·	KO SEC.
⊠ corporation	☐ limited partnership, all	andy formad		□ oth	er (please specify): 🖊	Aug 1 2 2003
•		•		Li otne	er (piease specify): A	AUG IN E
☐ business trust	☐ limited partnership, to					# IONASOIS
		Month		ear		THOMSON FINANCIAL
Actual or Estimated Date of Incorpora		08		-	Actual Estimated	Lilenton
Jurisdiction of Incorporation or Organ			bbrevia	tion for State:		
CN	for Canada; FN for other fo	reign 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.

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.

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 part					
Check Box(es) that Apply: Pro	moter 🗵	Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individ Chen, Richard	ual)				
Business or Residence Address (Nu 1565 Charleston Road, Mountain Vie		City, State, Zip Code)			
Check Box(es) that Apply:	moter 🗵	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individ Cho, Raymond	ual)				
Business or Residence Address (Nu 1565 Charleston Road, Mountain Vie		City, State, Zip Code)			
Check Box(es) that Apply:	moter 🗆 I	Beneficial Owner	ĭ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individ Mara, Frank	ual)				
Business or Residence Address (Nu 1565 Charleston Road, Mountain Vie		City, State, Zip Code)			
Check Box(es) that Apply:	moter 🗵 E	Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individ Leschly, Jacob	ual)				
Business or Residence Address (Nu 1565 Charleston Road, Mountain Vie		City, State, Zip Code)			
Check Box(es) that Apply:	noter 🗆 B	eneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individ Diekman, John	ual)				
Business or Residence Address (Nu c/o 5am Ventures, 3000 Sand Hill Ro			A 94025		
Check Box(es) that Apply:	noter 🗵 🛭	Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individ Felciano, Ramon	ual)				
Business or Residence Address (Nu 1565 Charleston Road, Mountain Vie		City, State, Zip Code)			
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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 is 	ssuers.			
Check Box(es) that Apply: ☐ Promoter ☐ Ben	eficial Owner	Executive Officer	☑ Director ☐	General and/or Managing Partner
Full Name (Last name first, if individual) Moon, John				
Business or Residence Address (Number and Street, Cic/o Morgan Stanley Dean Witter Private Equity, 1221 Av		3rd Floor, New York, NY	10020	
Check Box(es) that Apply: ☐ Promoter ☐ Ber	neficial Owner	Executive Officer	☐ Director ☐	General and/or Managing Partner
Full Name (Last name first, if individual) Kay, Cynthia				
Business or Residence Address (Number and Street, Ci 1565 Charleston Road, Mountain View, CA 94043	ty, State, Zip Code)			
Check Box(es) that Apply: ☐ Promoter ☐ Ber	eficial Owner	Executive Officer	☑ Director □	General and/or Managing Partner
Full Name (Last name first, if individual) Swartz, James				
Business or Residence Address (Number and Street, Ci c/o Accel Partners, 428 University Avenue, Palo Alto, Ca		, <u>, , , , , , , , , , , , , , , , , , </u>		
Check Box(es) that Apply: ☐ Promoter ☐ Ben	neficial Owner	Executive Officer	☑ Director □	General and/or Managing Partner
Full Name (Last name first, if individual) Wan, Mark				
Business or Residence Address (Number and Street, Ci c/o Three Arch Partners, 3200 Alpine Road, Portola Vall			1	
Check Box(es) that Apply: ☐ Promoter ☐ Ber	neficial Owner	Executive Officer	☐ Director ☐	General and/or Managing Partner
Full Name (Last name first, if individual) Oracle Corporation, 500 Oracle Parkway, Redwood City,	CA 94065			
Business or Residence Address (Number and Street, Ci	ty, State, Zip Code)	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
(Use blank sheet, or	copy and use additional	copies of this sheet, as nece	essary.)	

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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	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Millennium Pharmaceuticals, Inc.			
Business or Residence Address (Number and Street, City, State, Zip Code 75 Sidney Street, Cambridge, MA 02139	;)		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Morgan Stanley Dea Witter Capital Partners, L.P.			
Business or Residence Address (Number and Street, City, State, Zip Code 1221 Avenue of the Americas, 33rd Floor, New York, NY 10020	÷)		
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Three Arch Partners			
Business or Residence Address (Number and Street, City, State, Zip Code 3200 Alpine Road, Portola Valley, CA 94028	:)		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Accel Partners			
Business or Residence Address (Number and Street, City, State, Zip Code 428 University Avenue, Palo Alto, CA 94301	;)	+ 	
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Bay Partners			
Business or Residence Address (Number and Street, City, State, Zip Code 10600 N. De Anza Blvd., Suite 100, Cupertino, CA 95014-2076	:)		

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B. INFORMATION ABOUT OFFERING		
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No 🗷
Answer also in Appendix, Column 2, if filing under ULOE.	-	حبي
2. What is the minimum investment that will be accepted from any individual?	\$ 6,00	00 00
2. What is the minimum restrict that will be accepted from any marviadar.	Yes	No.00
3. Does the offering permit joint ownership of a single unit?	\boxtimes	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full Name (Last name first, if individual)		
None		
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 individual States)	☐ Al [ID] [MO] [PA] [PR]	l States
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Business of Residence Address (Number and Street, City, State, 21p Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	☐ All [ID] [MO] [PA] [PR]	l States
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Business of Residence Address (Number and Street, City, State, 21p Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		<u>-</u>
(Check "All States" or check individual States)	☐ AII [ID] [MO] [PA] [PR]	I States

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

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already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offer check this box \square and indicate in the columns below the amounts of the securities offered for exchange already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt		
Equity		
□ Common ⊠ Preferred	b <u>1,290,739.03</u>	3 <u>1,290,139.83</u>
Convertible Securities (including warrants)	\$	\$
Partnership Interests		
Other (Specify)		
Total		
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 thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat 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."	te	Aggregata
	Number	Aggregate Dollar Amount
Accredited Investors	Investors	of Purchases \$ 7,290,759.85
Non-accredited Investors		
Total (for filings under Rule 504 only)		
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 securit sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months pr to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	rior	
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
a. Furnish a statement of all expenses in connection with the issuance and distribution of a securities in this offering. Exclude amounts relating solely to organization expenses of the issuance and continuous three continuous and the securities. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	uer.	
Transfer Agent's Fees	🗖 \$	
Printing and Engraving Costs	🗆 \$	
Legal Fees	🗵 \$	30,000
Accounting Fees		
Engineering Fees		
Sales and Commissions (specify finders' fees separately)		
Other Expenses (identify)		
	······································	

	C. OFFERING PRICE, I	NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCE	DS
		ate offering price in response to Part C - Quesse to Part C - Question 4.a. This difference is		\$ 7,260,759.85
	used for each of the purposes shown. If the a estimate and check the box to the left of the	ss proceeds to the issuer used or proposed to be mount for any purpose is not known, furnish an estimate. The total of the payments listed must r set forth in response to Part C - Question 4.b		
			Payments to Officers, Directors, & Affiliates	è Payments to
	Salaries and fees		" \$	□ \$
	Purchase of real estate		\$	🗆 \$
	Purchase, rental or leasing and installation of	f machinery and equipment	- \$	\$
	Construction or leasing of plant buildings as	d facilities	□ \$	□ \$
	that may be used in exchange for the asse	the value of securities involved in this offering its or securities of another issuer pursuant to a	□ \$	\$
			□ \$	\$
	. ,		_	
			\$	□ \$
			_ \$	
			□ \$	× \$_7,260,759.85
	Total Payments Listed (column totals added)	_ 	7,260,759.85
	,	•		
		D. FEDERAL SIGNATURE		
ollo	wing signature constitutes an undertaking by	by the undersigned duly authorized person. If the issuer to furnish to the U.S. Securities and Expure to any non-accredited investor pursuant to passignature	change Commissic ragraph (b)(2) of R	n, upon written re-
cua	nuity Systems, Inc.	Signature	1	ate ily 29, 2003
ıger	e of Signer (Print or Type)		I	

- ATTENTION -

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