**SEC 1972** (6-02)

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.

### 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.



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

## FORM D

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response ...

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

SEC USE ONLY								
Prefix	Prefix Seri							
DATE RECEIVED								
· /A								

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)
Series C Preferred Stock and underlying Common Stock issuable upon conversion
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment MAR 1 7 2004
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.)
GC Holdings, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code)  Telephone Number (Including Area Code)
1220 Page Avenue, Fremont, CA 94538 510/438-7500
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  (Number and Street, City, State, Zip Code)
Brief Description of Business Development, manufacture and distribution of optical network equipment
Type of Business Organization  Corporation  Dimited partnership, already formed  other (please specify):  PROCESSED
business trust limited partnership, to be formed
Month Year MAR 18 200%
Actual or Estimated Date of Incorporation or Organization:
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

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

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.

SEC 1972



		A. BASIC IDENT	TIFICATION DATA							
2. Enter the informatio	n requested for the fol									
<ul> <li>Each promoter</li> </ul>	• Each promoter of the issuer, if the issuer has been organized within the past five years;									
<ul> <li>Each beneficia</li> </ul>										
securities of the										
<ul> <li>Each executive</li> </ul>	• 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		☑ Director	General and/or Managing Partner					
Full Name (Last name fire	st. if individual)									
Tompane, Rich										
	ddress (Number and Stenue, Fremont, CA 94	reet, City, State, Zip Code	)							
				- <del> </del>						
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner					
Full Name (Last name fire	st, if individual)									
Kvamme, Floy	d	•								
Business or Residence Ac	idress (Number and St	reet, City, State, Zip Code)	\ .							
		ers, 2750 Sand Hill Road,								
<del></del>	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	Managing Partner					
Full Name (Last name firs	et if individual)		·····		111111111111111111111111111111111111111					
•	at, ir individual)									
Seitz, Jim										
		reet, City, State, Zip Code) 2200 West Salzburg Road								
Check Box(es) that	Promoter	Beneficial Owner	Executive Officer	Director	General and/or					
Apply:				<del></del>	Managing Partner					
Full Name (Last name firs	t, if individual)									
Bischel, Willian	n									
Business or Residence Ad	dress (Number and Str	reet, City, State, Zip Code)								
	nue, Fremont, CA 94									
		· - <u></u>	Пт om		По11 <i>t</i>					
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name firs	+ if individual)									
<u>-</u>	•									
Cockroft, Nigel										
Business or Residence Ad	=									
	aue, Fremont, CA 94									
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner					
Full Name (Last name firs	t, if individual)									
Biswal, Madan			•							
Business or Residence Ad	dress (Number and Str	eet City State 7in Code)								
	ue, Fremont, CA 94									
Check Box(es) that	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or					
Apply:					Managing Partner					
Full Name (Last name first	t, if individual)									
Dow Corning E	nterprises, Inc.									
Business or Residence Ade	dress (Number and Str	eet, City, State, Zip Code)								
	hura Doad Auburn									

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

		A DACIC IDENO	DIELCATION DATE	~					
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 Avanex Corpora									
Business or Residence Add 40919 Encyclop	iress (Number and Stedia Circle, Fremon		)						
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first	•								
Business or Residence Add			)	····					
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 Add	ress (Number and St	reet, 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 Add	ress (Number and Str	reet, 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 Add	ress (Number and Str	reet, 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 Add	ress (Number and Str	eet, 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 Addr	ress (Number and Str	eet, City, State, Zip Code)							
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)									

					B. INFO	RMATION	ABOUT	OFFERING	<u> </u>				
1.	Has the issue	er sold, or d	oes the iss	suer intend	to sell, to	non-accredi	ted investor	s in this off	ering?			Yes	No ⊠
		,.,							_				
2.	Answer also in Appendix, Column 2, if filing under ULOE.  2. What is the minimum investment that will be accepted from any individual?\$									n/a			
	· · · · · · · · · · · · · · · · · · ·									Yes	No		
3.	Does the offering permit joint ownership of a single unit?								$\boxtimes$				
;	Enter the in commission a person to be states, list the broker or dea	or similar re be listed is a e name of	emuneration an associa the broker	on for soli- ted person or dealer	citation of or agent of . If more	purchasers of a broker of than five (5	in connection dealer regions to	on with sale gistered with b be listed a	s of securition the SEC a	es in the offend/or with a	ering. If a state or		
Full 1	Name (Last n	ame first, it	findividua	al)									
Busir	ness or Resid	ence Addre	ss (Numbe	er and Stre	et, City, St	ate, Zip Co	de)	··· <u>·</u> ···				<del></del>	
Name	of Associate	ed Broker o	r Dealer			·····							
States	s in Which P	erson Listed	i Has Soli	cited or In	tends to So	olicit Purcha	sers						
(Cl	heck "All Sta	tes" or chec	k individi	ual States)	***************************************	•••••	***************************************	••••••					1 States
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Busin	ess or Reside	ence Addre	ss (Numbe	er and Stre	et, City, St	ate, Zip Coo	le)	<del></del>				<u> </u>	<del></del>
Name	of Associate	ed Broker o	r Dealer										<del></del> -4
States	in Which Pe	rson Listed	Has Solid	cited or Int	ends to So	licit Purcha	sers						
(Ch	eck "All Star	tes" or chec	k individu	ıal States).	••••••	***************************************	•••••	***************************************	•••••		••••••		States
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[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]	[ P A	]
[RI	] [SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]	[PR	]
Full N	lame (Last na	me first, if	individua	l)									
Busin	ess or Reside	nce Addres	s (Numbe	r and Stree	et, City, Sta	ate, Zip Cod	(e)						
Name	of Associate	d Broker or	Dealer	** <u></u>									<del></del>
-													
	in Which Pe						sers			<del></del>			
(Ch	eck "All Stat	es" or chec	k individu	al States).	***************		••••••	•••••••				☐ Ali	States
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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	S-0-	\$-0-
	Equity	\$15,000,000	\$4,400,000
	☑ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$ <b>-0-</b>	\$-0-
	Partnership Interests	\$-0-	\$-0-
٠	Other (Specify)	S-0-	\$-0-
	Total	\$15,000,000	\$4,400,000
	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."		Annocato
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$4,400,000
	Non-accredited Investors	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 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		\$
	Regulation A		S
	Rule 504		\$
	Total		s
<b>\$</b> .	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	<u></u>	\$-0-
	Printing and Engraving Costs		\$-0-
	Legal Fees	_	
	Accounting Fees		\$-0-
	Engineering Fees		\$-0-
	Sales Commissions (specify finder's fees separately)		\$-0-
	Other Expenses (identify)		\$-0-
	Total	-	

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

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES A	ND I	JSE C	F PROCEED	S	
	Question I and total expenses furnished in re	ate offering price given in response to Part C - esponse to Part C - Question 4.a. This differen	ce is	the		\$	15,000,000
5.	used for each of the purposes shown. If the estimate and check the box to the left of the	gross proceeds to the issuer used or propose to amount for any purpose is not known, fur estimate. The total of the payments listed musforth in response to Part C - Question 4.b. above	nish stequ	an			
					Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees			\$-0-			\$-0-
	Purchase of real estate			-0-	<del>-</del>		-0-
	Purchase, rental or leasing and installati	on of machinery and equipment		\$-0-			\$-0-
	Construction or leasing of plant building	gs and facilities		S-0-			\$-0-
	Acquisition of other business (including offering that may be used in exchange for issuer pursuant to a merger)	the value of securities involved in this or the assets or securities of another		<b>\$-0-</b>			\$-0-
	Repayment of indebtedness			\$-0-			\$-0-
	Working capital			\$-0-		$\boxtimes$	\$15,000,000
	Other (specify):	, , , , , , , , , , , , , , , , , , ,					
				\$ <u>-0-</u>			\$ <u>-0-</u>
	Column Totals			\$ <u>-0-</u>		$\boxtimes$	\$15,000,000
	Total Payments Listed (column totals ad	ded)				$\boxtimes$	\$15,000,000
		·					
		D. FEDERAL SIGNATURE					
folio	issuer has duly caused this notice to be signowing signature constitutes an undertaking by taff, the information furnished by the issuer to	the issuer to furnish to the U.S. Securities and	Excl	ange	Commission, u	l und	ler Rule 505, the written request of
Issu	er (Print or Type)	Signature		Date	:		
GC	Holdings, Inc.	To Karampara		Feb	ruary 27	, 200	04
Nan	ne or Signer (Print or Type)	Title of Signer (Print or Type)		<b>-</b>			
Ricl	nard Tompane	President					
		·					

# ATTENTION

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