FORM D



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**

OMB APPROVAL

SEC USE ONLY

OMB Number:

Prefix

other (please specify)

DE

Actual Estimated

3235-0076

Expires: April 30, 2008

Estimated average burden

hours per response.....16.00

Serial

UNIFORM LIMITED OFFERING EX	EMPTION DATE RECEIVED
Name of Offering (check if this is an amendment and name has changed, and indica Sale and issuance of Warrant exercisable for shares of Common Stock	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐	Section 4(6) ULOE
Type of Filing: New Filing Amendment	NOV 0 9 2005
A. BASIC IDENTIFICATION I	DATA
1. Enter the information requested about the issuer	No.
Name of Issuer (check if this is an amendment and name has changed, and indicate	change.) 185/89
Codexis, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
200 Penobscot Drive, Redwood City, CA 94063	(650) 980-5600
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 Biotechnology Product Development	

Year

0 2

CENTED AT	INSTRUCTIONS
I-H WH.R A I .	TOURS THE TOURS

Actual or Estimated Date of Incorporation or Organization: 0 1

Type of Business Organization

corporation

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).

CN for Canada; FN for other foreign jurisdiction)

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.

limited partnership, already formed

limited partnership, to be formed

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

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.

	A. DASIC IDE	NIIFICATION DATA		
2. Enter the information requested for the for	ollowing:			
• Each promoter of the issuer, if the is	ssuer has been organized	within the past five years;		
 Each beneficial owner having the po of the issuer; 	ower to vote or dispose, o	or direct the vote or dispos	ition of, 10% or	more of a class of equity securities
• Each executive officer and director	of corporate issuers and o	of corporate general and n	nanaging partner	s 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) Maxygen, Inc.				
Business or Residence Address (Number at 301 Galveston Drive, Redwood City, CA 9		Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) CMEA Ventures Life Sciences 2000, L.P.			port.	
Business or Residence Address (Number a One Embarcadero Center, Suite 3250, San	•	Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) CTTV Investments LLC				
Business or Residence Address (Number a 6001 Bollinger Canyon Rd., San Ramon, C	• • • •	Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Pequot Private Equity Fund III, L.P.			1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	,
Business or Residence Address (Number a 2500 Sand Hill Road, Menlo Park, CA 940		p Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) Baruch, Thomas R.				
Business or Residence Address (Number a c/o CMEA Ventures, One Embarcadero C				
Check Box(es) that Apply:	Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Enright, Patrick				
Business or Residence Address (Number a	and Street, City, State, Zi	p Code)		
c/o Pequot Ventures, 2500 Sand Hill Road	, Menlo Park, CA 94025			
Check Box(es) that Apply:	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Gill, Simba				
Business or Residence Address (Number a c/o Maxygen, Inc., 301 Galveston Drive, R		-		

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

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) Howard, Russell J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Maxygen, Inc., 301 Galveston Drive, Redwood City, CA 94063 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Kelly, Bernard J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Codexis, Inc., 200 Penobscot Drive, Redwood City, CA 94063 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Shaw, Alan Business or Residence Address (Number and Street, City, State, Zip Code) c/o Codexis, Inc., 200 Penobscot Drive, Redwood City, CA 94063 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Gianakakos, Tassos Business or Residence Address (Number and Street, City, State, Zip Code) c/o Codexis, Inc., 200 Penobscot Drive, Redwood City, CA 94063 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Grate, John Business or Residence Address (Number and Street, City, State, Zip Code) c/o Codexis, Inc., 200 Penobscot Drive, Redwood City, CA 94063 Check Box(es) that Apply: Promoter Director General and/or ☐ Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or

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

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Managing Partner

SV\480872.1 035842-0022

				B. IN	FORMAT	ION ABOU	UT OFFER	RING	·			
											Yes	No
1. Has the	issuer sold,	or does the	issuer inter									\boxtimes
2. What is	the minim	ım investme	Answert that will		ppendix, Co						\$ N/A	
D. Wilatis	the minime	im mvestin	me mue wm	or accepto	a nom any	mar viadar .					Yes	No
3. Does th	e offering p	ermit joint	ownership o	of a single u	ınit?							\boxtimes
commis a persor states, l	sion or sim n to be liste ist the name	ilar remune d is an asso e of the bro	ed for each ration for so ciated perso ker or deale orth the info	olicitation on or agent er. If more	f purchasers of a broker than five (s in connect or dealer re 5) persons	ion with sa gistered wi to be listed	les of secur th the SEC	ities in the and/or with	offering. If h a state or		
	(Last name											
Business or	r Residence	Address (N	lumber and	Street, City	, State, Zip	Code)				_		
Name of A	ssociated B	roker or De	aler			***************************************						
States in W	hich Person	n Listed Ha	s Solicited o	or Intends to	Solicit Pur	rchasers				_		
			ividual Stat									☐ All States
[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]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (N	Number and	Street, City	y, State, Zip	Code)				_		d dimedia d
Name of A	ssociated B	roker or De	ealer	***	···					_		
			s Solicited									□ 411 C++++
[AL]	All States (or check inc [AZ]	IIVIGUAI Stai	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	All States
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NЛ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)				,			_		
Business o	r Residence	Address (1	Number and	Street, Cit	y, State, Zip	Code)						
			-									
Name of A	ssociated E	Broker or De	ealer									
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
			lividual Sta									. All States
[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] [RI]	[NE] [SC]	[NV] [SD]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA] [PR]
[1/1]	[SC]	[ပပ]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[r K]

SV\480872.1 035842-0022

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. Aggregate Amount Already Type of Security Offering Price Sold 0.00 0.00 Equity......\$ 0.00 0.00 ☐ Common ☐ Preferred Convertible Securities (Warrant exercisable for shares of Common Stock)\$ 6.370.00 6,370.00 Partnership Interests 0.00 0.00 0.00 Other (Specify ____ 0.00 Total......\$ 6,370.00 6,370.00 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." Aggregate Dollar Amount Number of Purchases Investors Accredited Investors 6,370.00 Non-accredited Investors. 0.00 N/A Total (for filings under Rule 504 only) N/A 0.00 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. Dollar Amount Type of Type of offering Security Sold Rule 505 0.00 N/A Regulation A 0.00 N/A Rule 504..... N/A 0.00 0.00 Total..... N/A 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>\$ N/A</u>
Printing and Engraving Costs		<u>\$ N/A</u>
Legal Fees	\boxtimes	\$1,000.00
Accounting Fees		<u>\$ N/A</u>
Engineering Fees		<u>\$ N/A</u>
Sales Commissions (specify finders' fees separately)		<u>\$ N/A</u>
Other Expenses (identify)		<u>\$ N/A</u>
Total	\boxtimes	\$1,000.00

	and total expenses furnished in response to	egate offering price given in response to Part C - p Part C - Question 4.a. This difference is the "ad	justed g	ross				
5.	the purposes shown. If the amount for any p	oss proceeds to the issuer used or proposed to be used urpose is not known, furnish an estimate and check thats listed must equal the adjusted gross proceeds to to eve.	ne box to	the .				
					Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees			□ \$	0.00		\$	0.00
	Purchase of real estate			□ <u>\$</u>	0.00		\$	0.00
	Purchase, rental or leasing and installa	tion of machinery and equipment		□ <u>\$</u>	0.00		\$	0.00
	Construction or leasing of plant buildi	ngs and facilities		□ <u>\$</u>	0.00		\$_	0.00
		ng the value of securities involved in this offering to sor securities of another issuer pursuant to a merge		□ <u>\$</u>	0.00		<u>\$</u>	0.00
	Repayment of indebtedness			□ <u>\$</u>	0.00		\$	0.00
	Working capital			□ <u>\$</u>	0.00	\boxtimes	\$	5,370.00
	Other (specify):			□ <u>\$</u>	0.00		\$_	0.00
	Column Totals			□ <u>\$</u>	0.00	\boxtimes	<u>\$_</u>	5,370.00
	Total Payments Listed (column totals	added)			⊠ _\$	5,370	.00	
		D. FEDERAL SIGNATURE		L .		. .		
sig	gnature constitutes an undertaking by the is	igned by the undersigned duly authorized person. suer to furnish to the U.S. Securities and Exchang -accredited investor pursuant to paragraph (b)(2) o	e Comr	nission				
	suer (Print or Type) Codexis, Inc.	Signature CM encles	h		Date November	r 7, 2005		
	ame of Signer (Print or Type) Nan C. Mendelson	Title of Signer (Print or Type) Secretary						

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

ATTENTION

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