# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 2

FORM D



02044894

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

OMB Approval 3235-0076 OMB Number: Expires: May 31, 2002 Estimated average burden hours per response...1

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SEC USE ONLY							
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DA	TE RECE	IVED					

Name of Offering ([ ] check if t Nanophase Technologies Corporat			and indicat	e change.)		
Filing Under (Check box(es) th Type of Filing: [x] New Filing []		[] Rule 505 [x] F	Rule 506	[] Section 4(6)	[] ULOE	
	A. BA	SIC IDENTIFICATION	ON DATA		1:	
1. Enter the information reques	ted about the issuer	·		- 6	PA	
Name of Issuer ([ ]check if this	is an amendment and n	ame has changed, an	d indicate c	hange.) Nanopha	se Technologie	es Corporation
Address of Executive Offices (Num	ber and Street, City, State,	Zip Code)	Teleph	one Number dinclud	ding Area Code)	
1319 Marquette Drive, Romeov	630-7	630-771-6700				
Address of Principal Business Oper (if different from Executive Offices)	ations (Number and Street,	City, State, Zip Code)	Teleph	one Number (Includ	ling Area Code)	
Brief Description of Business:	Developing and Marke	ting Nanocrystalline M	laterials.	(802)	×6	<i>F</i>
Type of Business Organization [X] corporation [ ] business trust		nip, already formed nip, to be formed	[]	other (please spe	ecify):	
Actual or Estimated Date of Inc		L	Year 9 7		] Estimate	OCESSED
Jurisdiction of Incorporation or	•	nada; FN for other for			1	111 1 8 2002

### **GENERAL INSTRUCTIONS**

#### Federal:

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Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 250.501 et sea. 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 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 in the notice constitutes a part of this notice and must be completed.

## 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.

Edon general and managing partner of partner only loaders.		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [X] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Cross, Joseph E.		
Business or Residence Address (Number and Street, City, State, Zip Code) 1319 Marquette Drive, Romeoville, Illinois 60446		·
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Siegel, Richard W.		
Business or Residence Address (Number and Street, City, State, Zip Code) 1319 Marquette Drive, Romeoville, Illinois 60446		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Henderson, James A.	•	
Business or Residence Address (Number and Street, City, State, Zip Code) 1319 Marquette Drive, Romeoville, Illinois 60446		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) McClung, James A.		
Business or Residence Address (Number and Street, City, State, Zip Code) 1319 Marquette Drive, Romeoville, Illinois 60446		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Pearlman, Jerry K.		
Business or Residence Address (Number and Street, City, State, Zip Code) 1319 Marquette Drive, Romeoville, Illinois 60446		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [ ] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Perkins, Donald S.		
Business or Residence Address (Number and Street, City, State, Zip Code) 1319 Marquette Drive, Romeoville, Illinois 60446		
Check Box(es) that Apply: [ ] Promoter [ ] Beneficial Owner [X] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Jankowski, Jess		
Business or Residence Address (Number and Street, City, State, Zip Code) 1319 Marquette Drive, Romeoville, Illinois 60446		

Check Box(es) that Apply:[ ] Promoter	[ ] Beneficial Owner [X] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual Bilicki, Daniel S.	)		
Business or Residence Address (Numb 1319 Marquette Drive, Romeoville, Illinois 6			
Check Box(es) that Apply: [ ] Promoter	[ ] Beneficial Owner [X] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual Brotzman, Richard W.	)		
Business or Residence Address (Numb 1319 Marquette Drive, Romeoville, Illinois 6	per and Street, City, State, Zip Code) 0446		
	[ ] Beneficial Owner [X] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual Freed, Donald J.	)		
Business or Residence Address (Numb 1319 Marquette Drive, Romeoville, Illinois 6			
Check Box(es) that Apply: [ ] Promoter	[ ] Beneficial Owner [X] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual Haines, Robert	)		
Business or Residence Address (Numb 1319 Marquette Drive, Romeoville, Illinois 6			
Check Box(es) that Apply: [ ] Promoter	[ ] Beneficial Owner [X] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual Kritchevsky, Gina R.	)		
Business or Residence Address (Numb 1319 Marquette Drive, Romeoville, Illinois 6			
Check Box(es) that Apply: [ ] Promoter	[X] Beneficial Owner [ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual Spurgeon Corporation	)		
Business or Residence Address (Numb 1560 Sherman Ave., Suite 900, Evanst			
	[X] Beneficial Owner [ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual Whitmore, Bradford T.	)		
Business or Residence Address (Numb 1560 Sherman Ave., Suite 900, Evanst			
Check Box(es) that Apply:[ ] Promoter	[X] Beneficial Owner [ ] Executive Officer	[ ] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual Grace Brothers, Ltd.	)		
Business or Residence Address (Numb 1560 Sherman Ave., Suite 900, Evanst			

<del>-</del>					B. I	NFORM	ATION A	ABOUT (	OFFERIN	IG				
													Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?.								ıg?.	[]	[x]				
				Answ	er also ir	n Append	lix, Colu	mn 2, if f	iling und	er ULOE.			• •	
2. Wh	at is the	e minim	um inve	stment t	hat will b	e accept	ed from	any indi	vidual?				\$50,00	0
						·		•					Yes	No
3. Does the offering permit joint ownership of a single unit?										[]	[X]			
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Busin	ess or F	Residen	ce Addr	ess (Nu	mber an	d Street,	City, Sta	ate, Zip C	ode)					
lame	of Ass	ociated	Broker	or Deale	r									
States	s in Whi	ich Pers	on Liste	ed Has S	olicited	or Intend	s to Soli	cit Purch	asers					
Chec	k "All S	tates" o	r check	individu	al States	s)							. [] All S	States
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IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
MTI	(NE)	[NV]	[NH]	[NJ]	[MM]	[NY]	INC1	[ND]	[OH]	[OK]	(OR)	(PA)		

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

[SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

[RI] [SC]

#### 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 Amount Already Offering Price Sold Debt ...... Equity..... \$7,500,000 \$6,850,000 [X] Common [ ] Preferred \$ Convertible Securities (including warrants)..... \$ Partnership Interests ..... \$ Other (Specify\_\_\_\_\_)......) Total \$7,500,000 \$6,850,000 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." Aggregate Number **Dollar Amount** Investors of Purchases Accredited Investors..... 8 . \$6,850,000 \$0 Non-accredited Investors NONE 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, 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 Dollar Amount Security Sold Rule 505..... Regulation A..... Rule 504 ..... Total ...... 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 ..... [] Printing and Engraving Costs..... Legal Fees..... \$30,000 [X] Accounting Fees..... \$23,000 [X] Engineering Fees .....

Sales Commissions (specify finders' fees separately).....

Other Expenses (identify) \_\_\_\_\_\_....

Total .....

\$\_\_\_

\$540,000

\$593,000 \*\*

[X]

[]

[X]

Vanor Vame		Acting Chief Financial Officer a	and Secre	etary T	
Vanor Vame	lankowski	Acting Chief Financial Officer a	and Secre	etary	
Vanor	of Signer (Print or Type)	Title of Signer (Print or Type)			
	phase Technologies Corporation	Jan			') - 11 -() L 
Rule 5 Comm oursua	suer has duly caused this notice to be signed be 505, the following signature constitutes an under sission, upon written request of its staff, the identity paragraph (b)(2) of Rule 502.  (Print or Type)	ertaking by the issuer to furnish	to the Ussuer to	.S. Sec any no Date	urities and Exchang
	D. FE	DERAL SIGNATURE			
	Total Payments Listed (column totals added)			[x] \$ <sub>6</sub> ,	257,000
	Column Totals		[]\$		[X] \$ <u>6,257,000</u>
			[]\$		[]\$
	Other (specify):				[]\$
	Working capital				k) \$_6.257.000
	another issuer pursuant to a merger)		ſ1 <b>\$</b>		[]\$
	Acquisition of other businesses (including the this offering that may be used in exchange for	r the assets or securities of	[]\$		[]\$
	Construction or leasing of plant buildings and		[]\$		[]\$
	Purchase, rental or leasing and installation of	· · · · · · · · · · · · · · · · · · ·			[]\$
	Purchase of real estate				[]\$
	Salaries and fees		Affil		Payments To Others []\$
			Óffic	ents to	
est	icate below the amount of the adjusted gross proposed to be used for each of the purposes surpose is not known, furnish an estimate and chairmate. The total of the payments listed must be ceeds to the issuer set forth in response to Particles.	shown. If the amount for any seck the box to the left of the st equal the adjusted gross			
pro	estion 4.a. This difference is the "adjusted gross	shed in response to Part C - s proceeds to the issuer."			\$6,257,000
to to Qu Qu 5. Ind pro	Enter the difference between the aggregate off	ering price given in response			

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