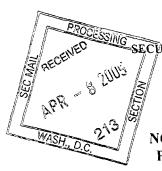
178518

# 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 APPE	ROVAL
	05049	o ransi cadas astra dais (88)
[	Prefix	Serial I

DATE RECEIVED

UNIFORM LIMITED OFFERING EXEMPTIO	ON
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Private Placement of up to 5,172,500 units	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section Type of Filing: ☐ New Filing ☒ Amendment	n 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Taseko Mines Limited	
Address of Executive Offices (Number and Street, City, State, Zip Code T	elephone Number (Including Area Code)
Suite 1020 - 800 West Pender Street, Vancouver, British Columbia, V6C 2V6	04-684-6365
Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices	elephone Number (OCESSED)e)
Brief Description of Business	APR 1 2 2005
Mineral exploration	TIMEON
Type of Business Organization	please specify): THOMSON FINANCIAL
Actual or Estimated Date of Incorporation or Organization:    Month Year	☐ Estimated

### **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.

**////** 

#### 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. General and/or Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer Director Managing Partner Full Name (Last name first, if individual) Copeland, David J. Business or Residence Address (Number and Street, City, State, Zip code) 1020 - 800 West Pender Street, Vancouver, BC V6C 2V6 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Cousens, Scott D. Business or Residence Address (Number and Street, City, State, Zip code) 1020 - 800 West Pender Street, Vancouver, BC V6C 2V6 Check Box(es) that Apply: Executive Officer General and/or Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Dickinson, Robert A. Business or Residence Address (Number and Street, City, State, Zip code) 1020 - 800 West Pender Street, Vancouver, BC V6C 2V6 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer $\boxtimes$ Director General and/or Managing Partner Full Name (Last name first, if individual) Coughlan, T. Barry Business or Residence Address (Number and Street, City, State, Zip code) 1020 - 800 West Pender Street, Vancouver, BC V6C 2V6 Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** $\boxtimes$ Director General and/or Managing Partner Full Name (Last name first, if individual) Mason, Jeffrey R. Business or Residence Address (Number and Street, City, State, Zip code) 1020 - 800 West Pender Street, Vancouver, BC V6C 2V6 Beneficial Owner ☐ Executive Officer General and/or Check Box(es) that Apply: Promoter П Director Managing Partner Full Name (Last name first, if individual) Milner, Thomas E. Business or Residence Address (Number and Street, City, State, Zip code) 1020 - 800 West Pender Street, Vancouver, BC V6C 2V6

A. BASIC IDENTIFICATION DATA

Check Box(es) that Apply: Promoter Beneficial Owner		□ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Thiessen, Ronald W.			
Business or Residence Address (Number and Street, City, State, Zip code)			
1020 - 800 West Pender Street, Vancouver, BC V6C 2V6			
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Elliott, David			
Business or Residence Address (Number and Street, City, State, Zip code)			
1020 - 800 West Pender Street, Vancouver, BC V6C 2V6			
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Kirk, Wayne			
Business or Residence Address (Number and Street, City, State, Zip code)			
1020 - 800 West Pender Street, Vancouver, BC V6C 2V6			

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

	B. INFORMATION ABOUT OFFERING		
		Yes	No
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	📙	$\boxtimes$
	Answer also in Appendix, column 2, of filing under ULOE.		
2.	What is the minimum investment that will be accepted from any individual?	<u>N/A</u> Yes	No
3.	Does the offering permit joint ownership of a single unit?		
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.		
Ful	ll Name (Last name first, if individual)	<del></del>	
N/A			
Bus	siness or Residence Address (Number and Street, City, State, Zip code)		
Nar	me of Associated Broker or Dealer		
1141	ine of Associated Broker of Dealer		
Sta	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(	Check "All states" or check individual States)	·· 🗆	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
Ful	ll Name (Last name first, if individual)		
Rus	siness or Residence Address (Number and Street, City, State, Zip code)		
Dus	siness of Residence Address (Namber and Sirect, City, State, Zip code)		
Nar	me of Associated Broker or Dealer		
			·
	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All states" or check individual States)		A 11 G4-4
r	AL AK AZ AR CA CO CT DE DC FL GA	HI	All States
L, T	IL IN IA KS KY LA ME MD MA MI MN	MS	MO
ſ	MT NE NV NH NJ NM NY NC ND OH OK	OR	PA
ſ	RI SC SD TN TX UT VT VA WA WV WI	WY	PR
Ful	Il Name (Last name first, if individual)		
Bus	siness or Residence Address (Number and Street, City, State, Zip code)		
<del></del>			
Nai	me of Associated Broker or Dealer		
Sta	ttes in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
	(Check "All states" or check individual States)	🔲	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
Γ	RI SC SD TN TX UT VT VA WA WV WI	WY	PR

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

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1.	Enter the aggregate 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.		
		Aggregate Offering Price	Amount Already Sold
	Type of Security		
	Debt	\$0	\$0
	Equity	\$ <u>602,185</u>	\$ <u>602,185</u>
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$0	\$0
	Partnership Interests	\$0	\$0
	Other (Specify Debt)	\$0	\$0
	Total	\$602,185	\$ <u>602,185</u>
2.	Answer also in Appendix, Column 4, if filing under ULOE.  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 amounts of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	parentages on the total times. Enter a mane to the times of the times		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	1	\$ 602,185
	Non-accredited Investors		\$ 0
	Total (for filings under Rule 504 only)		\$ 0
	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.		
	Town of Official	Type of Security	Dollar Amount Sold
	Type of Offering		•
	Rule 505	<del></del>	\$
	Regulation A	<del></del>	\$
	Rule 504		\$
	Total	\$0.00	\$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.		
	Transfer Agent's Fees	$\boxtimes$	\$500
	Printing and Engraving Costs		\$
	Legal Fees	$\boxtimes$	\$_8,000
	Accounting Fees	×	\$_1,000
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	$\overline{\Box}$	\$
	Other Expenses (identify)	П	\$ -
	Total	☒	\$_9,500
	I ViaI	_	

	C. OFFERING PRICE, NU	MBER OF INVESTORS, EXPENSES AND	USE	OF PROCEEDS	<u> </u>	
	b. Enter the difference between the aggregate off and total expenses furnished in response to Part C gross proceeds to the issuer."	- Question 4.a. This difference is the "adjuste	ed			\$ <u>592,685</u>
5.	Indicate below the amount of the adjusted gross p for each of the purposes shown. If the amount for check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Part	r any purpose is not known, furnish an estimate I of payments listed must equal the adjusted gr	e and			
	proceeds to the issuer set forth in response to 1 are	C - Question 4.0 above.		Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees			\$	$\boxtimes$	\$ 60,000
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installation of mac and equipment			\$		\$
	Construction or leasing of plant buildings and fac	ilities		\$		\$
	Acquisition of other businesses (including the val may be used in exchange for the assets or securiti			\$		\$
	Repayment of indebtedness			\$		\$
	Working capital			\$		\$
	Other (specify): costs associated with resource r			\$	$\boxtimes$	\$ <u>532,685</u>
	• • •		-			
				\$		\$
	Column Totals			\$		\$ <u>532,685</u>
	Total Payments Listed (column totals added)			⊠ \$ <u>592,6</u>	85	
		D. FEDERAL SIGNATURE				
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furnation furnished by the issuer to any non-accredit	mish to the U.S. Securities and Exchange Con	nmissio	on, upon written r		
		nature 1914 have	Date	APRIL 4	16:	<u> </u>
	eko Mines Limited me of Signer (Print or Type) Titl	cof Signer (Print or Type)		14110 /		
Jef	frey R. Mason Chi	ef Financial Officer, Secretary & Director	<del></del>			

## ATTENTION

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

		E. STATE SIGNATURE							
1.		resently subject to any of the disqualification		Yes	No ⊠				
		See Appendix, Column 5, for state response							
2.	2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.								
Issu	er (Print or Type)	Signature	Date						
Tase	Taseko Mines Limited  APRIL 4/05								
Nan	e of Signer (Print or Type)	Title of Sigler (Print or Type)							
Jeffe	effery R. Mason Chief Financial Officer, Secretary & Director								

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX								
1	Intent to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of inv amount purcha (Part C-I	restor and ased in State		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-ltem 1)	
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited				No
AL									
AK									
AZ									
AR									
CA									
со									
СТ									
DE								1	
DC									
FL									
GA	· <del>-</del> ·								
ні									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									

**APPENDIX** 1 2 3 4 5 Disqualification Type of security under State ULOE and aggregate (if yes, attach Intent to sell offering price Type of investor and explanation of to non-accredited offered in state amount purchased in State waiver granted) investors in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Amount Investors Amount Yes No MO MT NE NV NH NJ NM NY NC ND ОН OK OR PA RI SC SD TN TX X Units @ CDN\$1.45 N/A  $\mathbf{X}$ 1 592,685 None per Unit (US\$1.20) UT VT VA WA WV WI

				APP	ENDIX				
1	Intent to non-a investor	to sell ccredited s in State	Type of security and aggregate offering price offered in state	4  Type of investor and amount purchased in State  (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	(Part C-Item 1)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No No
WY PR									