# 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 UNIFORM LIMITED OFFERING EXEMPTION

OMB APPF	ROVAL
OMB Number:	3235-0076
Expires:	ŀ
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hours per response ...... 16.00

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Name of Offering ( check if this is an amendment	SOENED S							
Island Timberlands Finance Corp.								
Filing Under (Check box(es) that apply): Rule 504 Type of Filing: New Filing Amendment	Rule 505 🗷 Rule 506 🔲 Section 4(6)	□ULOE SEP 3 2005						
	A. BASIC IDENTIFICATION DATA							
1. Enter the information requested about the issuer		100/s/						
Name of Issuer ( check if this is an amendment and name	has changed, and indicate change.)							
Island Timberlands Finance Corp.								
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)						
3000 Shell Centre, 400 - 4th Avenue S.W.,	Calgary, Alberta, T2P 0J4 Canada	(604) 669-3141						
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)						
(if different from Executive Offices)	Vancous Dakish Columbia MCD 2D5	(604) 669-3141						
2050 - 1055 West Georgia Street,	Vancouver, British Columbia, V6E 3R5, Canada							
Brief Description of Business								
Special purpose corporation to serve as an issuer of securities.		PRUCCOCIO						
Type of Business Organization		1 / ard 2 2005						
<ul> <li>☑ corporation</li> <li>☐ business trust</li> <li>☐ limited partnership</li> </ul>								
	5, to be formed	THOMSON						
	Month Year	THOMSON FINANCIAL						
Actual or Estimated Date of Incorporation or Organization:		stimated						
Jurisdiction of Incorporation or Organization: (Enter two-lette		CN						
CN for Canada; FN for other foreign jurisdiction) C N								

#### 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.

SEC 1972 (6-02)

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.

#### 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) Island Timberlands GP Ltd. Business or Residence Address (Number and Street, City, State, Zip Code) 2050 - 1055 West Georgia Street, Vancouver, British Columbia, V6E 3R5, Canada ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☑ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Kress, Edward C.. Business or Residence Address (Number and Street, City, State, Zip Code) BCE Place, 181 Bay Street, Suite 300, Toronto, Ontario, M5J 2T3, Canada Executive Officer ■ Director General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Davis, Bryan K. Business or Residence Address (Number and Street, City, State, Zip Code) BCE Place, 181 Bay Street, Suite 300, Toronto, Ontario, M5J 2T3, Canada ☐ Promoter ☐ Beneficial Owner Executive Officer ☑ Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Chu, Lisa W. Business or Residence Address (Number and Street, City, State, Zip Code) BCE Place, 181 Bay Street, Suite 300, Toronto, Ontario, M5J 2T3, Canada General and/or ☐ Beneficial Owner **■** Executive Officer ☑ Director Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) Dean, Alan V. Business or Residence Address (Number and Street, City, State, Zip Code) BCE Place, 181 Bay Street, Suite 300, Toronto, Ontario, M5J 2T3, Canada Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☑ Director General and/or Managing Partner Full Name (Last name first, if individual) Marshall, Kelly Business or Residence Address (Number and Street, City, State, Zip Code) BCE Place, 181 Bay Street, Suite 300, Toronto, Ontario, M5J 2T3, Canada

E Executive Officer

☐ Director

General and/or Managing Partner

☐ Beneficial Owner

Sihota, Darshan

Check Box(es) that Apply:

Full Name (Last name first, if individual)

□ Promoter

Check Box(es) that Apply:	Name (Last name first, if individual)  er, Reid  ness or Residence Address (Number and Street, City, State, Zip Code)  1 - 1055 West Georgia Street, Vancouver, British Columbia, V6E 3R5, Canada  Ek Box(es) that Apply:   Promoter Beneficial Owner Executive Officer Director	☐ Director	☐ General and/or Managing Partne		
Check Box(es) that Apply:					
Carter, Reid					
Business or Residence Address	s (Number and Street	t, City, State, Zip Code)			
2050 - 1055 West Georgia Stre	eet, Vancouver, Britis	sh Columbia, V6E 3R5, Canad	a		
	· · · · · · · · · · · · · · · · · · ·			☐ Director	General and/or Managing Partne
Check Box(es) that Apply:	☐ Promoter			☐ Director	_ 0

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

2050 - 1055 West Georgia Street, Vancouver, British Columbia, V6E 3R5, Canada

						B. INFO	RMATION	ABOUT O	FFERING				
1.				A	nswer also	in Appendix,	Column 2 if	filing under					
2.	What	is the mini	mum inve	stment that w	vill be accep	ted from any	individual?		•••••				
3.	Does	the offering	g permit jo	int ownershi	p of a single	unit?							Yes No □ 🗷
4.	solicit regist	tation of pu ered with th	rchasers in ne SEC and	n connection d/or with a s	with sales o tate or states	f securities in	n the offering e of the brok	g. If a persor er or dealer.	rectly or indir to be listed i If more than	s an associate	ed person or a	igent of a bro	neration for ker or dealer ted persons of
		(Last nam		ndividual)							··		
		n Securitie											
270	Park A	Avenue, 9th	Floor, Ne	w York, Nev		y, State, Zip ( 17 U.S.A.	Code) 						
Nam	ne of A	Associated I	Broker or I	Dealer									
State	es in V	Vhich Perso	n Listed H	Ias Solicited	or Intends to	Solicit Purc	hasers						
(Che	eck "A	.ll States" o	r check in	dividual Stat	es)	•••••		•••••				A	ll States
[AL [✓II [MT [RI]	Ĺ] []	[AK] [~IN] [~NE] [SC]	[AZ] [✓IA] [NV] [SD]	[AR] [KS] [NH] [✓TN]	[✓CA] [✓KY] [✓NJ] [✓TX]	[√CO] [LA] [NM] [√UT]	[ CT] [ME] [ NY] [ VT]	[DE] [MD] - [✔NC] [VA]	[DC] [✓MA] [ND] [✓WA]	[FL] [MI] [✔OH] [WV]	[	[HI] [MS] [OR] [WY]	[ID] [✓MO] [✓PA] [PR]
Full	Name	(Last nam	first, if ir	ndividual)									<u></u>
Busi	iness o	r Residenc	Address	(Number and	d Street, City	, State, Zip (	Code)						
Nan	ne of A	ssociated I	Broker or I	Dealer									
State	es in V	Vhich Perso	n Listed F	las Solicited	or Intends to	Solicit Purc	hasers						-
(Che	eck "A	.ll States" o	r check in	dividual Stat	es)							A	Il States
[AL [IL] [MT [RI]	[]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full	Name	(Last nam	e first, if ir	ndividual)						_			
Busi	iness o	or Residenc	e Address	(Number and	d Street, City	y, State, Zip (	Code)						<del></del>
Nan	ne of A	ssociated I	Broker or I	Dealer									
State	es in V	Vhich Perso	n Listed F	las Solicited	or Intends t	o Solicit Puro	chasers		75	_			
(Che	eck "A	all States" o	r check in	dividual Stat	es)		•••••					🗆 A	all States
[AL [IL] [MI [RI]	Γ]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

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

	Type of Security	Aggregate	Amount Already Sold
	Debt	Offering Price \$ 367,000,000	\$ 367,000,000
		Ψ <u></u>	\$ <u>30710001000</u>
	Equity	\$	\$
	☐ Common ☐ Preferred	_	
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$367,000,000	\$367,000,000
		307,000,000	307,000,000
	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 th 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 answers "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	49	\$ 367,000,000
	Non-accredited Investors		\$
	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. N/A		
	Type of offering	Type of	Dollar Amount
	Rule 505	Security	Sold \$
	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	<b>x</b>	\$ <u>1,015,237.67</u>
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finder's fees separately)		\$ <u>1,521,483.45</u>
	Other Expenses (identify)		\$ \$2,536,721.12
	Total	<b>x</b>	

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

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Directors, & Payments To Affiliates Others Salaries and fees Purchase of real estate ..... **□** \$ Purchase, rental or leasing and installation of machinery and equipment ..... □ \$\_\_\_\_ □ \$\_\_\_\_\_ Construction or leasing of plant buildings and facilities ..... □ \$\_\_\_\_\_ □ \$ Acquisition of other businesses (including the value of securities involved in this offering that may □ \$ be used in exchange for the assets or securities of another issuer pursuant to a merger) ...... Repayment of indebtedness □ **\$** □ \$ 363,434,467.03 Working capital ..... **□** \$ 1,028,811.85 □ **\$** Other (specify): working capital, management fee and investments **□** \$ Column Totals □ **\$** 0.00 □ \$\_364,463,278.88 Total Payments Listed (column totals added) □ \$364,463,278.88 D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Signature Date September 13 , 2005 Island Timberlands Finance Corp. Title of Signer (Print or Type) Name of Signer (Print or Type) Vice President Kelly Marshall

ATTENTION

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

	E. STATE SIGNATURE			
Is any party described in 17 CFR 230.262 presently s     provisions of such rule?	ubject to any of the disqualification		Yes	No 🗷
	See Appendix, Column 5, for state response.			
2. The undersigned issuer hereby undertakes to furnish such times as required by state law.	to any state administrator of any state in which this not	ice is filed a notice on Form D (17	CFR 239	.500) at
3. The undersigned issuer hereby undertakes to furnish	to the state administrators, upon written request, informa	tion furnished by the issuer to offe	rees.	
<ol> <li>The undersigned issuer represents that the issuer is f (ULOE) of the state in which this notice is filed and these conditions have been satisfied.</li> <li>The issuer has read this notification and knows the continuous contin</li></ol>	I understands that the issuer claiming the availability o	f this exemption has the burden of	f establish	ing that
person.	ones to be true and has dury caused this notice to be sign	ica on its benan by the undersigne	d duly au	inorized
Issuer (Print or Type) Island Timberlands Finance Corp.	Signature /	Date September 13, 2005		
Name (Print or Type)	Title (Print or Type)			
Kelly Marshall	Vice President			

#### 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	Intend to non-a investor	I to sell ccredited s in State Item 1)	Type of security and aggregate offering price offered in state (Part C - Item 1)		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		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK										
AR										
AZ										
CA				2	\$34,000,000					
СО				1	\$7,000,000					
СТ				2	\$8,000,000					
DE										
DC										
FL							-			
GA				4	\$36,000,000					
HI	-									
ID										
IL				5	\$36,000,000					
ΙΝ										
IA	<u>.</u>			6	\$27,500,000					
KS										
KY										
LA										
ME										
MD										
MA				2	\$6,000,000					
MI										
MN				10	\$18,000,000					
MS										
МО					en en en en estado de estado en estado en estado en estado en estado en estado en entre en entre en entre en e					
MT	,,,,,									
NE				3	\$9,000,000		`			

1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C - Item 1)		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		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
NV											
NH											
NJ								-			
NM											
NY				7	\$92,000,000						
NC				2	\$14,000,000						
ND											
ОН											
ок											
OR											
PA				1	\$18,500,000						
PR											
RI											
SC											
SD											
TN				2	\$23,500,000						
TX											
UT											
VT											
VI											
WA				1	\$14,000,000						
wv											
WI				1	\$23,500,000						
WY											