9999999999 09/18/2005

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

132.	<i>5</i> 3	2	2
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OMB APP	POVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	age burden
hours per respo	nse16.00

UNIFORM LIMITED OFFERING EXEM	PTION SEGMAN
Name of Offering (check if this is an amendment and name has charged, and indicate change.) NMC, INC. Number 2	PHON SECULED &
Filing Under (Check box(es) that apply):	□ ULOE \$ 23 2005
A. BASIC IDENTIFICATION DATA	
l. Enter the information requested about the issuer	SECTION
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Address of Executive Offices (Number and Street, City, State, Zip Code) 2711 Cool Lilac Ave. Henderson, NV 89502-3835	Telephone Number (Including Area Code) 702-837-1162
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Mining activities, including, without limitation: milling, exploration, processing and developme	ent of precious metals. PROCESSED
Type of Business Organization Our Corporation Dimited partnership, already formed other (p	olease specify): SEP 2 8 20052
Month Year Actual or Estimated Date of Incorporation or Organization: 0 4 8 4 Actual Estiv Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated FINANCIAL
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 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.

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 predictated on the filing of a federal notice.

> Persons who 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.

1 of 9

SEC 1972 (6-02)



		A. BASIC II	DENTIFICATION DATA									
 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 issue. 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, i	f individual)											
Business or Residence Addre 2711 Cool Lilac Ave. He			Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owner	F Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, i Pietrzak, Michael J.	f individual)											
Business or Residence Addre			Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, Mind & Body Associates	•											
Business or Residence Addre			Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	☑ Director	General and/or Managing Partner							
Full Name (Last name first,	if individual)											
Business or Residence Addre	ess (Number and	Street, City, State, Zip	Cocle)									
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	☑ Director	General and/or Managing Partner							
Full Name (Last name first, i Sheppard, Michael	if individual)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
Business or Residence Addre 2711 Cool Lilac Ave. He			Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, i	f individual)											
Business or Residence Addre	ss (Number and	Street, 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, i	findividual)											
Business or Residence Addre	98 (Number and	Street, City, State, Zip (Code)									
	(Use blan	nk sheet, or copy and us	se additional copies of this s	hcct, as necessary)								

				B. If	NFORMAT	ON ABOU	T OFFERI	NG				
1. Has the	: issuer sold	l, or does th	ne issuer in	ntend to se	ll, to non-a	credited in	nvestors in	this offeri	ng?	,,,,,	Yes	No S
			Ans	wer also in	Appendix,	Column 2	, if filing t	inder ULO	E.		45	000.00
2. What is	the minim	um investn	ent that w	ill be acce	pted from a	my individ	ual?	•••••			\$	00.00
3. Does th	ne offering	permit join	ownershi	p of a sing	le unit?	11111111111	·····			***************************************	Y¢s ® €	No
commis If a pers or state	ssion or sim son to be lis s, list the na	ion request ilar remune ted is an ass ime of the b you may s	ration for s ociated pe roker or de	olicitation rson or age aler. If mo	of purchase at of a brok are than five	ers in conne er or deale e (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in tl EC and/or	he offering. with a state		
Full Name (Last name	first, if indi	vidual)									
Business or	Residence	Address (N	umber and	i Street, Ci	ty, State, Z	ip Code)	·		······································			***************************************
Name of As	sociated Br	oker or De	aler									
States in W	hich Person	Listed Ha	Solicited	or Intends	to Solicit l	Purchasers			····			
(Check	"All States	s" or check	individual	States)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,	***************************************				☐ Al	l 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	MS OR WY	MO PA PR
Full Name (Last name	first, if ind	ivi d ual)									
Business o	r Residence	Address (Number an	d Street, C	City, State,	Zip Code)						
Name of As	sociated Br	roker or De	aler									
States in W	hich Persor	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State:	s" or check	individual	States)	*************************							l 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	MS OR WY	MO PA PR
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (Number an	d Street, C	City, State,	Zip Code)		, -			·	
Name of As	sociated B	roker or De	aler				~~~					
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						N
(Check	"All State	s" or check	individua	l States)				,,,			☐ Al	I States
AL IL MT R1	AK IN NE SC	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	MO PA PR

\$ 0.00 \$ 0.00

30,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) 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		\$ 0.00
	Debt	5,000,000.00	\$ 0.00
	Equity Preferred		0.00
	Convertible Securities (including warrants)	\$ 0.00	\$ \$ 0.00
			\$ 0.00
		· · · · · · · · · · · · · · · · · · ·	\$ 0.00
	Other (Specify) ,	\$_3,000,000.00	\$ 0.00
	Answer also in Appendix, Column 3, if filing under OLOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat 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 of Purchases
	Accredited Investors	, 0	\$_0.00
	Accredited Investors Non-accredited Investors	. 0	\$ 0.00
	Non-accredited Investors Total (for filings under Rule 504 only)	., 0	s 0.00
	Total (for filings under Rule 504 only)		_
3.	The second secon	Type of	Dollar Amoun
	Type of Offering	Security	Sold
	Rule 505	Equity	\$ 0.00
	Regulation A		\$
	Rule 504		\$_1,000,000.0
	Total		\$_1,000,000.0
4		he er.	
	Transfer Agent's Fees		\$_0.00
	Printing and Engraving Costs	-	5 ,000.00
	Legal Fees	······	5 15,000.00
	Accounting Fees	·	Z \$_10,000.00
	Engineering Fees	_	s 0.00

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

Other Expenses (identify)

Total

L_	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted g	ross	\$
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate Ethe payments listed must equal the adjusted g	and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		************	
	Purchase of real estate			\$ 450,000.00
	Purchase, rental or leasing and installation of mac		······ (
	and equipment		🗀 💲	2 \$ 1,255,000.0
	Construction or leasing of plant buildings and fac	ilities	S	\$ 800,000.00
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	🗀 \$	\[\\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Repayment of indebtedness			\$ 0.00
	Working capital		C \$	\$ 800,000.00
	Other (specify): Core core drilling on mining pro	operties - \$503,000.00 ;		
	Assay costs of samples from core drilling and as	ssays of other samples \$400,000.00		
	Set up and calibration of ICP's, furnaces, pulver	rizers, reclamation of property \$200,000.	 	Z \$ 1,100,000.0
	Column Totals			
	Total Payments Listed (column totals added)		Z \$ <u>_5,</u>	000,000.00
		D. FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Cor	nmission, upon writte	
155	er (Print or Type)	Signature	Date	
NI	IC, INC.	M. Kes	April 16, 2005	
Na	ne of Signer (Print or Type)	Title of Signer (Print of Type)		
	rice W. Furlong	President		

- ATTENTION -

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

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No K

See Appendix, Column 5, for state response.

- 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. 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.

Issuer (Print or Type)	Signature	Date
NMC, INC.	WEG	April 16, 2005
Name (Print or Type)	Title (Print or Type)	
Maurice W. Furlong	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.

				AP	PENDIX				
1	Intend to non-2 investor	I to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 f investor and rchased in State C-Item 2)		under Sta (if yes, explan waiver	lification ate ULOE
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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AZ		×							
AR		×						;	
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ME		×							1
MD		×							
MA		×							,
MI		X							
MN		×							
MS		×							

М

				AFP	ENDIX					
1	Intend to sell to non-accredited investors in State (Part B-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	
MÒ		×							A area are represent analytic for a	
МТ		×								
NE		×						1	1% Ordinado obramanos	
NV		×	\$5,000,000.00	1		0	\$0.00		×	
NH		×								
NJ		×						Primaries as	1	
NM		×						1	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
NY		×								
NC		×						J. 100 - 100		
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				APP	ENDIX				
J	to non-a investor	2 I to sell corredited s in State l-Item 1)	Type of security and aggregate offering price offered in state (Part C-item 1)		amount pu	4 Finvestor and rchased in State C-Item 2)		under St (if yes explan waiver	lification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY		×					_		* * * * * * * * * * * * * * * * * * *
PR	, •	×							