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 IFORM LIMITED OFFERING EXEMPTION

1335	179							
OMB APPR	OVAL							
OMB Number: Expires: Estimated average bur hours per response								
SEC USE ONLY								
Prefix	Serial							
DATE REC	DATE RECEIVED							

Name of Offering (19 check nothing as an amendment and name has changed, and indicate change.)								
Note Financing (and the preferred and common stock issuable upon conversion thereof)								
Rule 504	☐ Rule 50.5	☑ Rule 506	Section 4(6)	ULOE				
Amendment								
A.]	BASIC IDENTIF	ICATION DATA						
issuer.				LATIN ANTO ANDO ATTO MATO AND				
ment and name has o	hanged, and indicate	change.)						
NewsDB, Inc.								
Address of Executive Offices (Number and Street, City, State, Zip Code)								
10014				05067048				
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)								
				PROGRASIO				
				SI 20 AB				
limited partnersh	ip, already formed	other	(please specify):					
limited partnersh	ip, to be formed			THOUSON				
`		ervice Abbreviation for		Estimated				
	d common stock in Rule 504 Anendment A. issuer. ment and name has common and name h	d common stock issuable upon con Rule 504 Rule 505 Amendment A. BASIC IDENTIF issuer. ment and name has changed, and indicate (Number and Street 10014 (Number and Street limited partnership, already formed limited partnership, to be formed Month Organization: 0 2 [Enter two-letter U.S. Postal Street	A. BASIC IDENTIFICATION DATA issuer. ment and name has changed, and indicate change.) (Number and Street, City, State, Zip Code) (Number and Street, City, State, Zip Code)	Rule 504				

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.

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.

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.

> 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.

SEC 1972 (6-02)

		A. BASIC IDENTI	FICATION DATA		
2. Enter the information r			art Sive vector		
		as been organized within the pa vote or dispose, or direct the v		more of a class of ea	uity securities of the issuer
		porate issuers and of corporate g			•
Each general and ma	anaging partner of part	nership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, Shardanand, Upendra	if individual)				
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			· · · · · · · · · · · · · · · · · · ·
374 W. 11th Street #5, Nev	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, Tercek, Thomas	if individual)				
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			
324 Farragut Avenue, Has	•	· - · - · · · · · · · · · · · ·			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	. General and/or Managing Partner
Full Name (Last name first, Donovan, John	if individual)				
Business or Residence Addi	ess (Number and St	reet, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
299 Riverside Drive, Apt.	5E, New York, NY	10025			
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Jarvis, Jeff	if individual)				
Business or Residence Adda	ress (Number and S	reet, City, State, Zip Code)			
141 Deer Ridge Road, Bas	king Ridge, NJ 079				
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Harris, Jonathan	if individual)				
Business or Residence Adda 215 East 72nd Street, New	•	treet, 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,	if individual)				
Business or Residence Addr	ress (Number and S	treet, 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,	if individual)			bilistin ilmis T Marie III vi 1	
Business or Residence Add	ress (Number and S	treet, City, State, Zip Code)			

				B. II	NFORMAT	TION ABO	UT OFFE	RING					
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									Yes	No ⊠			
What is the minimum investment that will be accepted from any individual?										••••••	\$	n/a	
3. Does th	e offering r	ermit joint	oumerchin	of a single	unit?						Yes ⊠	No	
	٠.	-	•	_								Ļ	
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. NONE									es in the EC and/or	3 /2	<u>-</u>		
Full Name (Last name first, if individual) n/a													
Business or	Residence A	Address (Nu	mber and S	Street, City	, State, Zip	Code) n/a							
Name of Ass	sociated Br	oker or Deal	ler n/a										
States in Wh	ich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers							
(Check "A	All States"	or check ind	ividuals Sta	ates)	••••••				•••••		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 i	irst, if indiv	idual) n/a										
Business or	Residence	Address (Nu	mber and S	Street, City	, State, Zip	Code) n /a							
Name of As	sociated Br	oker or Dea	ler n/a		1								
States in Wh	nich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers							
(Check "All States" or check individuals 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]	
Full Name (Last name first, if individual) n/a													
Business or Residence Address (Number and Street, City, State, Zip Code) n/a													
Name of Associated Broker or Dealer n/a													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individuals States)									🔲 A	Il 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]	[NЛ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RJ]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

,	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PRO	CEEDS		
I.	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.			
	Type of Security	Aggregate Offering Price	Am	ount Already Sold
	Debt	\$	\$	0.00
	Equity	\$ 0.00	\$	0.00
	☐ Common ☐ Preferred		_	
	Convertible Securities (including warrants)	\$ 1,500,000.00	\$_	730,000.00
	Partnership Interests	\$0.00	\$_	0.00
	Other (Specify)	\$ 0.00	\$	0.00
	Total	\$ 1,500,000.00	s -	730,000.00
	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."			A garagesto
		Number Investors	Do	Aggregate llar Amount f Purchase
	Accredited Investors	22	\$_	730,000.00
	Non-accredited Investors	0	\$	0.00
	Total (for filings under Rule 504 only)	0	\$_	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.		Da	llar Amount
	Type of Offering	Security	20	Sold
	Rule 505	n/a	\$_	n/a
	Regulation A	n/a	\$	n/a
	Rule 504	n/a	\$	n/a
	Total		\$_	n/a
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 insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish ar estimate and check the box to the left of the estimate.	,		
	Transfer Agent's Fees		\$	0.00
	Printing and Engraving Costs		s -	0.00
	Legal Fees	\boxtimes	s ⁻	8,500.00
	Accounting Fees		s –	0.00
	Engineering Fees		\$	0.00
	Sales Commissions (specify finders' fees separately)		\$	0.00
	Other Expenses (identify)		s ⁻	0.00
	Total	\boxtimes	s _	8,500.00