1342409

FORM D RECEIVED

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 APPROVAL OMB Number: 3235-0076 Expires: November 30, 2001 Estimated average burden hours per response . . . 16.00

SEC USE ONLY							
Prefix	Serial						
DATE RECEIVED							

	Old Did Did Did O	11101				
Name of Offering (check if this is an	amendment and name has changed, and indicate change.)					
International Battery, Inc.						
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section	on 4(6) LILOF				
Type of Filing: New Filing	Amendment					
	A. BASIC IDENTIFICATION DATA					
1. Enter the information requested about the	issuer					
	nendment and name has changed, and indicate change.)					
International Battery, Inc.		05069622				
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
81 N. Maple Avenue	Ridgewood, NJ 07450	201-444-3232				
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
Brief Description of Business						
-	igh energy and high-power lithium primary ((non-rechargeable) and lithium-ion				
Type of Business Organization						
	☐ limited partnership, already formed	other (please specify):				
business trust	limited partnership, to be formed					
Actual or Estimated Date of Incorporation of Jurisdiction of Incorporation or Organization	Month Year Organization:	Actual Estimated UCF 27 2005 te:				

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 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.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promotor 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 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 Partner Full Name (Last name first, if individual) Kaufman, John Business or Residence Address (Number and Street, City, State, Zip Code) 81 N. Maple Avenue, Ridgewood, NJ 07450 Check Box(es) that Apply: Promoter ⊠ Beneficial Owner □ Director Sole member of General Partner Full Name (Last name first, if individual) Barrella, Joseph Business or Residence Address (Number and Street, City, State, Zip Code) 81 N. Maple Avenue, Ridgewood, NJ 07450 Check Box(es) that Apply: Promoter □ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) General Thomas Schwartz Business or Residence Address (Number and Street, City, State, Zip Code) 81 N. Maple Avenue, Ridgewood, NJ 07450 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 Address (Number and Street, City, State, Zip Code) Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (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, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

10.75				В.	INFORM	ATION AE	OUT OFF	ERING				No. 19	
l l Una ti	h o <i>i</i> agy o - a o 1	مماميم	tha isayaa i					: 				Yes	No ⊠
1. Has u	ne issuer soi	a, or does						-	**************			. []	
2 What	is the minin	mum invoc			appendix, C		•				•••••	\$100 .	000
	esser amoui										•••••••	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 									. 🛛				
	ar remunerat												
	sociated per r or dealer.												
	nation for th						F			, , , -			
			<u> </u>										
The Comm serve as pla	cement age	ent. They	will be paid	l a 6% con	ımission.		The Com	pany has r	etained Th	e Keystone	e Equities G	roup, L	P to
Business or		•			, State, Zip	Code)							
The Key	stone Eq	luities (i roup, L	P									
Name of As	sociated Bro	oker or De	aler										
1003 Egy	ypt Road	l, Oaks,	PA										
States in W	nich Person	Listed Has	Solicited o	r Intends to	Solicit Pur	chasers		,					
(Check '	'All States"	or check is	ndividual St	ates)								□All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DEX]	[DC]	[FL] [GA] [HI] [ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	l
[MT]	[NE]	[NV]	[NH]	[NJX]	[NM]	[NYX]	[NC]	[ND]	[OH]	[OK]	[OR]	[PAX]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VAX]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name (Last Name 1	first, if ind	ividual)										
Business or	Residence A	Address (N	umber and S	Street, City	, State, Zip	Code)				<u></u>			
										-			
Name of As	sociated Bro	ker or De	aler										
Trame of As	sociated Die	oker or bea	aici										
0		Y 1 . 1 YY	0.11 () 1	*	a u · b								
States in Wh													0
	'All States"			•								_	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]		[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Name ([IX]	[01]	[41]	[VA]	[WA]	[44 4]		[44 1]	(IK)	
		,	,										
Business or	Residence A	Address (N	umber and S	Street City	State Zin	Code)							
Dusiness of	residence i	1441655 (11	amoer and s	meet, eng,	, state, zip	code)							
	4					<u></u>		· · · · · · · · · · · · · · · · · · ·					
Name of Ass	sociated Bro	oker or Dea	aler										
States in Wh	nich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers							
(Check "	'All States"	or check ir	ndividual 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]	l
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[XX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	<u> </u>

36	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E O	FPROCEED	S 🖄	de C	CEPT ENGLES
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 \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Pri			Amount Already Sold
	Debt	\$	0		\$	_0
	Equity	\$	5,000,000		\$	0
	☐ Common ☐ Preferred	_				
	Convertible Securities (including warrants)	\$_	0		\$_	0
	Partnership Interests	\$_	00		\$_	0
	Other (Specify)	\$_	0		\$_	0
	Total	\$	5,000,000		\$	0
	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."		Number			Aggregate Dollar Amount
			Investors			of Purchases
	Accredited Investors	_	0		\$_	
	Non-accredited Investors	_	0		\$_	0
	Total (for filings under Rule 504 only)	_	0		\$_	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.		T f			D. Handarana
	Type of offering		Type of Security			Dollar Amount Sold
	Rule 505		0		\$	0
	Regulation A		0		\$	0
	Rule 504		0		\$	0
	Total		0		\$	0
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		**********		\$_	0
	Printing and Engraving Costs		********		\$_	0
	Legal Fees				\$	0
	Accounting Fees		******		\$	0
	Engineering Fees				\$_	0
	Sales Commissions (specify finders' fees separately)			\boxtimes	\$_	300,000
	Other Expenses (identify)				\$	0
	Total				\$	0
				Ø	_	300,000

C. OFFERING PRICE, NU	MBER OF INVESTORS, EXPEN	SES AND USI	OF PROCEED	S	
b. Enter the difference between the aggregate of Question I and total expenses furnished in response "adjusted gross proceeds to the issuer."	to Part C - Question 4.a. This diff	ference is the		\$ <u>4,7</u>	00,000
5. Indicate below the amount of the adjusted gross profor each of the purposes shown. If the amount for archeck the box to the left of the estimate. The total gross proceeds to the issuer set forth in response to P	by purpose is not known, furnish an of the payments listed must equal	estimate and			
			Payments to Officers, Directors, & Affiliates	Р	ayments To Others
Salaries and fees		S_	0	_ 🗆 \$	0
Purchase of real estate		🗆 s_	0	_ 🗆 \$	0
Purchase, rental or leasing and installation of ma	chinery and equipment	🗆 \$_	_ 0	_ 🗆 \$	0
Construction or leasing of plant buildings and fac-	cilities	s_	0	□ s	0
Acquisition of other businesses (including the va that may be used in exchange for the assets or see merger)	lue of securities involved in this officurities of another issuer pursuant to	ering a S	0	□ \$	0
Repayment of indebtedness				- □ * □ \$	0
Working capital		_		_ □ ³ ⊠ \$ 4,7	
Other (specify):					
Offici (specify).		LJ 』_	U		
44.4			00	s	0
Column Totals		S_	0	⊠ \$ <u>4,</u> 7	00,000
Total Payments Listed (column totals added)				0,000	_
	D. FEDERAL SYCNATURE			7.756220	
The issuer has duly caused this notice to be signed by signature constitutes an undertaking by the issuer to furinformation furnished by the issuer to any non-accredited	irnish to the U.S. Securities and E	xchange Comm	ission, upon writ		
Issuer (Print or Type)	Signature 0 0		Date		
International Battery, Inc.	Sibry 1	<u> </u>	Sep	tember ³≠	3, 2005
Name of Signer (Print or Type)	Title of Signer (Print or Type)	\overline{X}			
John Kaufman	Chairman and Chie	f Executive	Officer		
	•				

_____ ATTENTION_

	The second secon	E. STATE SIGNATURE	tales and the second
1.	Is any party described in 17 CFR 230.262 presently su	bject to any of the disqualification provisions of such	Yes No
	See A	Appendix, Column, for state response.	
2.	The undersigned issuer hereby undertakes to furnish (17 CFR 239.500) at such times as required by law.	to any state administrator of any state in which this	notice is filed, a notice on Form D
3.	The undersigned issuer hereby undertakes to furnish offerees.	to the state administrators, upon written request, in	formation furnished by the issuer to
4.	The undersigned issuer represents that the issuer is Offering Exemption (ULOE) of the state in which thi has the burden of establishing that these conditions ha	s notice is filed and understands that the issuer claim	
	issuer has read this notification and knows the content authorized person.	s to be true and has duly caused this notice to be sig	ned on its behalf by the undersigned
Issue	er (Print or Type)	Signature	Date
In	ternational Battery, Inc.	John Her	September ॐ, 2005
Nam	e (Print or Type)	Title (Frint or Type)	
Jo	hn Kaufman	Chairman and Chief Executive Offi	icer

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.

ACCUSED AND ACCUSE		
	ADDENING	

1	2 3 4							<u> </u>	5
	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 investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
C4	17			Number of Accredited Investors		Number of Non-Accredited			
State	Yes	No	Common Stock	Investors	Amount	Investors	Amount	Yes	No
AL AK									
AZ									
AR									
CA									
СО									
СТ									
DE		X	\$5,000,000	0	0	0	0		X
DC									
FL		X	\$5,000,000	0	0	0	0		X
GA									
ні									
ID									
IL							<u></u>		
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									
МО									

			APPEND	
CENTRAL PROPERTY AND				

1	Intend	2 I to sell	3 Type of security and aggregate	4					5 lification rate ULOE , attach	
	investors	ccredited s in State -Item 1)	offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
MT										
NE										
NV	i	i								
NH					···					
NJ		X	\$5,000,000	0	0	0	0		X	
NM					·					
NY		X	\$5,000,000	0	0	0	0		X	
NC										
ND										
ОН	_							ļ		
ок										
OR										
PA		X	\$5,000,000	0	0	0	0		X	
RI										
SC										
SD										
TN								ļ		
TX										
UT		-						ļ		
VT								 		
VA										
WA										
wv			*					<u> </u>		
WI							·			
WY										
PR										