		,
		134775
FORM D	UNITED STATES RE	CEIVED OMB APPROVAL
	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549	OMB Number: 3235-0076
	DEC .	Expires:
	FORM D	3 200 Estimated average burden hours per response16.00
05074428	NOTICE OF SALE OF SECURITIE PURSUANT TO REGULATION D SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEM	DATE RECEIVED
Name of Offering (check if this is an arr	endment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Type of Filing: New Filing Amen	Rule 504 Rule 505 Rule 506 Section 4(6)	☐ nroe
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the	issuer	
Name of Issuer (check if this is an amenda AgStar, LLC	dment and name has changed, and indicate change.)	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3301 Turley Road, Corydon Indiana 471	12	812-734-0484
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		<u> </u>

Type of Business Organization corporation	limited partnership, already formed	
business trust	limited partnership, to be formed	Limited Liability Co
	Month Year	

Actual or Estimated Date of Incorporation or Organization: Actual Estimated 0 3 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

THOMSON

GENERAL INSTRUCTIONS

CN for Canada; FN for other foreign jurisdiction)

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 sed. or 13 0 S C.

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 predictated on the filing of a federal notice.

SEC 1972 (6-02)

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



William Company of the Company of th	Service No.	
2. Enter the information requested for the following:		
• Each promoter of the issuer, if the issuer has been organized within the past five years,	C 100/	t 6 to model a section
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of		-
Each executive officer and director of corporate issuers and of corporate general and management and the second seco	aging partners of f	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) Gregg Whittaker		
Business or Residence Address (Number and Street, City, State, Zip Code) 1416 Woodbury Drive, Liberty Missouri 64068		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Keith Ward		
Business or Residence Address (Number and Street, City, State, Zip Code) 3301 Turley Road, Corydon, Indiana 47112		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Stephen Carr		***************************************
Business or Residence Address (Number and Street, City, State, Zip Code)		
3301 Turley Road, Corydon, Indiana 47112		
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)	*** * * * ****************************	
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)		
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)		
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)		

		T) H		d and so		uctorio		O					S. in a
1	Was the	icenar cold	Lou does th	e issuer i	stand to cal	il to non-a	i katibara	avertors in	this offeri			Yes	No
1	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.									80			
2.	What is the minimum investment that will be accepted from any individual?									S			
•	What is the infillium investment that will be accepted from any intrividual:										Yes	No	
3.		-	permit joint										
4.	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.								ne offering. with a state				
Ful	ll Name (Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	l Street, Ci	ty, State, Z	ip Code)			** •			
Na	me of As:	sociated Br	oker or Dea	ıler				-		<u> </u>			
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		* **				
	(Check	"All States	or check	individual	States)	etajak i meri kalancea zako el ki e	*********	Name (1111)					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	MO PA PR
Ful	ll Name (Last name	f u st, if indi	vidual)									
Bu	siness or	Residence	Address (P	lumber an	d Street, C	ity, State,	Zip Code)						
Na	me of As	sociated B	roker or Dea	alei				;		···			
Sta			Listed Has										
	(Check	"All State:	s" or check	individua!	States)	F - N - N - N N - J - 1 - N N N 1 N 1 N 1 N 1 N 1 N 1 N 1 N	1 8 - 18 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Fu	ll Name (Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (?	lumber an	d Street, C	ity, State,	Zip Code)			·			
Na	me of As	sociated B	roker or Dea	aler				·			······································		
Sta	ites in WI	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individua	States)		· · · · · · · · · · · · · · · · · · ·	(PREST) 11 B M 1 B M M M M M M M M M M M M M M M M M M	Mariana içanışını Hadisa	## .### # *## * ***	**************	☐ 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

1	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 \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Amount Almostic
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 0.00	\$ 0.00
	Equity		\$ 0.00
	✓ Common Preferred		
	Convertible Securities (including warrants)	\$ 0.00	0.00 \$
	Partnership Interests		\$ 0.00
	Other (Specify LLC units		\$ 220,000.00
	Total	\$ 1,130,000.00	\$ 220,000.00
	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."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$ 220,000.00
	Non-accredited Investors		\$ 0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		4
3.			
	True of Officia	Type of	Dollar Amount
	Type of Offering	Security N/A	Sold
	Rule 505		\$
	· ·		\$
	Rule 504 Total		\$ \$ 0.00
4	•		\$_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 insurer 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		\$ 0.00
	Legal Fees	Z	
	Accounting Fees	_	\$_500.00
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)		\$_0.00
	Other Expenses (identify)		\$_0.00
	Total		g 30,500.00

na i i i i i i i i i i i i i i i i i i i	Planting .	
b. Enter the difference between the aggregate offering price given in response to Part C — Question do and total expenses furnished in response to Part C — Question d.a. This difference is the "adjusted g proceeds to the issuer."	goss	1,099,500.00
Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used each of the purposes shown. If the amount for any purpose is not known, furnish an estimate check the box to the left of the estimate. The total of the payments listed must equal the adjusted g proceeds to the issuer set forth in response to Part C — Question 4.b above.	and	
	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	\$ <u>830,000.00</u>	S 0.00
Purchase of real estate.	s 0.00	\$ <u></u>
Purchase, rental or leasing and installation of machinery and equipment	_	
Construction or leasing of plant buildings and facilities		15,000.00
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)		□\$ ^{0.00}
Repayment of indebtedness		S 0.00
Working capital		\$ 30,000.00
Other (specify): Patent work, marketing expenses, research and development, phone		199,500.00
website, miscellaneous	U •	
	m ¢	
Column Totals		- 🗀
Total Payments Listed (column totals added)	\ps_1,	099,500.00
THE TARREST THE TRANSPORT OF THE TRANSPO		
e issuer has duly caused this notice to be signed by the undersigned duly authorized person. Whis constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Co	minission, upon writte	
e information furnished by the issuer to any non-accredited investor pursuant to paragraph (1)(2 suer (Print or Type)	Date	
oStar, LLC	2 12	1.0)
ame of Signer (Print or Type) Title of Signer (Print of Type) Title of Signer (Print of Type)	enter	

·ATTENTION

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

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.		
2	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this D (17 CFR 239.500) at such times as required by state law.	notice is filed a no	tice on Form
3	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written reques issuer to offerees.	t, information fur	nished by the
4	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfie limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the of this exemption has the burden of establishing that these conditions have been satisfied.		

duly authorized person.			L consigned on assessment of the amounting
Issuer (Print or Type)	Signature	111	Date
AgStar, LLC	TEVILL	MO	T /2.7.0)
Name (Print or Type)	Title (P) in the Type C		Wember

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.

					yarı (187			* /// <u>*</u>	
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		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									
AZ									
AR									
CA									
со									
СТ									
DE									
DC									
FL									
GA									
н									
ID									
IL									
IN									
IA						· · · · · · · · · · · · · · · · · · ·			
KS									
KY									
LA									
ME						·			
MD									
MA							,		
MI									
MN									
MS									

7					23.15 <i>(</i> 77.2				
1	Intend 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)		amount pu	investor and rehased in State 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
мо	×	·	Equity 20,000/ unit	7	\$140,000.00	0	\$0.00		×
MT						·			
NE			·			_			
NV									
NH							e.		
NJ					-				
NM									
NY	×		Equity 20,000/ unit	2 、	\$40,000.00	0	\$0.00		×
NC									
ND									
ОН									
ок									
OR									
PA									
RI					<u> </u>				
SC									
SD									
TN									
TX									
UT									
VT				·					
VA									
WA									
wv									
WI	×		Equity 20,000/ unit	2	\$40,000.00	0	\$0.00		×

	PR						-				
V	VY										
Si	tate	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
		Intend to sell and aggregate offering price investors in State (Part B-Item 1) Type of securit 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)	
Г	1		2	3			4		5		
					() () () () () () () () () ()	7.47.67					