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

13159	² 54
OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated ave	rage burden
hours per respo	nse 16.00

SEC US	E ONLY_
Prefix	Serial
DATE R	ECEIVED

UNIFOR	M LIMITED OFFERING EXEMI	TION
Name of Offering(check if this is an amendment a WorldSpace, Incoffering of up to \$40 million of		
	e 504 Rule 505 Rule 506 Section 4(6)	ULOE Mall Processing Section
	A. BASIC IDENTIFICATION DATA	JAN 14 2008
1. Enter the information requested about the issuer		37.84 7.75
Name of Issuer (check if this is an amendment worldSpace, Inc.	and name has changed, and indicate change.)	Washington, DC 101
Address of Executive Offices 8515 Georgia Avenue Silver Spring, MD 20910	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code) (301) 960-1200
Address of Principal Business Operation RO (if different from Executive Offices)	Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Satellite-based digital radio services	N 1 5 2008 TEOMSON	
corporation limited	FINANCIAL pertnership, already formed other (p pertnership, to be formed	lease specify. 08020523
Actual or Estimated Date of Incorporation or Organiz Jurisdiction of Incorporation or Organization: (Enter CN		
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securities	in reliance on an exemption under Regulation D or Section	14(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 Exchange Commission (SEC) on the earlier of the date it is on the date it was mailed by United States registered or commission.	is received by the SEC at the address given below or, if rec	
Where To File: U.S. Securities and Exchange Commission	on, 450 Fifth Street, N.W., Washington, D.C. 20549.	
Copies Required: Five (5) copies of this notice must by photocopies of the manually signed copy or bear typed o		y signed. Any copies not manually signed must be
Information Required: A new filing must contain all inf the information requested in Part C, and any material char 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 precond tion 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 ε 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 10

SEC 1972 (5-05)

American LegalNet, Inc. www.tiSCourtForms.com

A. BASIC IDENTIFICATION 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 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. Beneficial Owner Executive Officer □ Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Samara, Noah A. Business or Residence Address (Number and Street, City, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 20910 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Ganesan, Sridhar Business or Residence Address (Number and Street, City, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 20910 Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Armstrong, Gregory B. Business or Residence Address (Number and Street, C.ty, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 20910 Promoter Beneficial Owner Executive Officer Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Brown, Alexander P. Business or Residence Address (Number and Street, City, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 20910 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Frickel, Donald J. Business or Residence Address (Number and Street, City, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 20910 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Kebede, Kassahun Business or Residence Address (Number and Street, City, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 20910 Promoter Beneficial Owner □ Director Check Box(es) that Apply: Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Laramie, James R. Business or Residence Address (Number and Street, City, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 20910 □ Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner

Full Name (Last name first, if individual) Mathias, Charles McC.							
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 20910							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual) Nobel, Dr. Michael							
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 20910							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual) Richter, Frank-Jürgen							
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 20910	_						
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual) Schneider, William							
Business or Residence Address (Number and Street, City, State, Zip Code) c/o WorldSpace, Inc., 8515 Georgia Avenue, Silver Spring, MD 26910							
Check Box(es) that Apply: Promoter Seneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual) Yenura Pte. Ltd.							
Business or Residence Address (Number and Street, City, State, Zip Code) c/o CitiLegal LLC, 7 Temasek Boulevard, #21-02 Suntec Tower One, Singapore 038987							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							
Full Name (Last name first, if individual) Aletheia Research and Management, Inc.							
Business or Residence Address (Number and Street, City, State, Zip Code) 100 Wilshire Boulevard, Suite 1960, Santa Monica, CA 90401							
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner							

B. INFORMATION ABOUT OFFERING													
					,							Yes	No
1.	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									\boxtimes			
Answer also in Appendix, Column 2, if filing under ULOE.													
2. What is the minimum investment that will be accepted from any individual?									\$ <u>1,000,000</u> Yes	No No			
 Does the offering permit joint ownership of a single unit? 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. 								otly, any offering. th a state		×			
Full	Name ((Last name	first, if indiv	idual)									
Bus	iness or	Residence	Address (Nu	mber and S	Street, City,	State, Zip (Code)						
Nan	ne of As	ssociated Br	oker or Deal	er									
State	es in W	hich Person	Listed Has	Solicited or	r Intends to	Solicit Purc	hasers						
	(Ch	eck "All Sta	tes" or check	individua	l States)							🗆 A	Il States
	AL IL MT	AK IN NE SC	AZ IA VV 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	GA MN DK WI	HI MS OR WY	MO PA PR
Full	Name ((Last name	first, if indiv	idual)								_	
Busi	iness or	Residence .	Address (Nu	mber and S	Street, City,	State, Zip (Code)					·	
Nan	ne of As	ssociated Br	oker or Deal	er									
State	es in W	hich Person	Listed Has	Solicited or	r Intend; to	Solicit Purc	hasers						
	(Che	eck "All Sta	tes" or check	individua	l States)	<i>.</i>						🗆 A	Il States
[IL MT RI	AK IN NE SC	AZ IA VV	KS NH TN	KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN DK WI	MS OR WY	MO PA PR
Full	Name ((Last name	first, if indiv	idual)									
Busi	iness or	Residence	Address (Nu	mber and S	Street, City,	State, Zip (Code)						
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)													
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[RI	SC	SD	TN	тх	UT	VT	VA	WA	wv	wı	WY	PR

	(Use blank sheet, or copy and use additional copies of this sheet, as nece	essary.)	_	
	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS		
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 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	А	mount Already Sold
	Debt\$	0	_ \$_	0
	Equity\$	0	_ s	0
	Common Preferred		-	
	Convertible Securities (including warrants)\$	40,000,000	_ \$_	2,490,000
	Partnership Interests\$	0	_ \$_	0
	Other (Specify)\$	0	_ \$_	0
	Total\$			2,490,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
	purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Aggregate Pollar Amount of Purchases
	Accredited Investors	1	\$	2,490,000
	Non-accredited Investors	0	. \$	0
	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.			
	Type of Offering	Type of Security	1	Dollar Amount Sold
	Rule 505		\$	
	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 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] \$ _	
	Legal Fees	×	s	75,000

□ s_____

75,000

\$___

□ \$_

X \$_

Accounting Fees

Total.....

Other Expenses (identify)

<u></u>	C. OFFERING PRICE, NUM	MBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS		
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Pan C – proceeds to the issuer."			s	39,925,000
5.	Indicate below the amount of the adjusted gress preach of the purposes shown. If the amount for a check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Part	roceed to the issuer used or proposed to be used for ny purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross	l		
			Payments to Officers, Directors, & Affiliates	P	ayments to Others
	Salaries and fees		□ s	_ 🗆 s.	
	Purchase of real estate		□ \$	_ 🗆 \$.	<u>. </u>
	Purchase, rental or leasing and installation of ma		□ \$	_ 🗆 \$	
	Construction or leasing of plant buildings and fac	cilities	□ s	_ □ s	
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass issuer pursuant to a merger)	ets or securities of another			
	Repayment of indebtedness				
	Working capital Other (specify):				
	Other (specify).		□ Ψ	_ ⊔ ".	···.
			□ \$	_ 🗆 \$.	
	Column Totals		□ \$	0 . \$	39,925,000
	Total Payments Listed (column totals added)		\$	39,925,	000
Γ		D. FEDERAL SIGNATURE			
sig	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to funformation furnished by the issuer to any non-accumulation.	rnish to the U.S. Securities and Exchange Commis	sion, upon writt	tule 505, en reque	the following st of its staff,
	ner (Print or Type)	Signature MA	January 7, 200)8	
_	orldSpace, Inc.	10 yrence			
	ne of Signer (Print or Type)	Title of Signer (Print or Type)			
Do	nald J. Frickel	Executive Vice President			

END

- ATTENTION -

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