TRULITE INC Form 4

November 20, 2007

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287

Estimated average

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Number: January 31, Expires: 2005

OMB APPROVAL

Section 16. Form 4 or Form 5 obligations

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

burden hours per response... 0.5

See Instruction 1(b).

(Last)

(Print or Type Responses)

may continue.

1. Name and Address of Reporting Person * Godshall Jonathan H

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

(Middle)

TRULITE INC [TRUL.OB]

(Check all applicable)

5 HOUSTON CENTER, 1401

(Street)

(First)

3. Date of Earliest Transaction (Month/Day/Year)

11/07/2007

X Director X_ Officer (give title

10% Owner Other (specify

MCKINNEY STREET, SUITE 900

4. If Amendment, Date Original

Chief Executive Officer

Filed(Month/Day/Year)

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

HOUSTON, TX 77010-4035

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)

(Month/Day/Year)

2. Transaction Date 2A. Deemed Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

below)

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (T) (Instr. 4) (Instr. 4)

Reported (A) Transaction(s)

Code V Amount (D) Price

(Instr. 3 and 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security

Conversion or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if

any

4. 5. Number of **Transaction**Derivative Code Securities

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	or (E (Iı	Acquired (A) or Disposed of D) Instr. 3, 4, nd 5)					
				Code V	V (A	()	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Warrants for purchase Common Stock par value \$.0001per share	\$ 0.5	11/07/2007		M		4	50,000	11/07/2007	11/07/2008	Common Stock, par value \$.0001 per share	50,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other			
Godshall Jonathan H 5 HOUSTON CENTER 1401 MCKINNEY STREET, SUITE 900 HOUSTON, TX 77010-4035	X		Chief Executive Officer				

Signatures

Person

/s/ Jonathan H.
Godshall

**Signature of Reporting

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations, See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

These warrants were granted in connection with the Note and Warrant Purchase Agreement entered into between Trulite, Inc., Mr.

(1) Godshall, and several other investors, pursuant to which investors could purchase "Units" comprising (i) an unsecured promissory note in the original principal amount of \$25,000, and (ii) a warrant to purchase 25,000 shares of the Issuer's common stock. The per-Unit price was \$25,000, and the warrants were immediately and fully exercisable as of the transaction date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2