FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20349
REGENED RECEIVED

NOTICE OF SALE OF SEPURSUANT TO REGUL

OMB APPROVAL

OMB Number:

Expires:

3235-0076

May 31, 2005

Estimated average burden Hours per response: 16.00

9	EC USE ONL	Y
Prefix		Serial
D	ATE RECEIVE	ED

SECTION 4(6), AND/OR	DATE RECEIVED
UNIFORM LIMITED OFFERING EXEMPTION	
Name of Offering (  check if this is an amendment and name has changed, and indicate change NEXUS DKR Macro Fund Ltd.	) 1324183
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section	4(6) ULPENCESSED
Type of Filing: New Filing	·
A. BASIC IDENTIFICATION DATA	APR 1 9 2005
1. Enter the information requested about the issuer	THUMSON
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  NEXUS DKR Macro Fund Ltd.	THUMSON
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o AIG International Asset Management Ltd., 29 Richmond Road, Pembroke HM08 Bermuda	Telephone Number (Including Area Code) (441) 298-5298
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business To operate as a private investment fund.	1
Type of Business Organization  ☐ corporation ☐ limited partnership, already formed ☐ other ☐ business trust ☐ limited partnership, to be formed	er (please specify): a Bermuda exempted company
Actual or Estimated Date of Incorporation or Organization: Month Year 06 2002	
Jurisdiction of Incorporation or Organization (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction)	State: _FN_
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulati 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 and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given 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. 20 Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manuphotocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only rechanges thereto, the information requested in Part C, and any material changes from the information prevalent process and the properties of the second that have adopted this form. Issuers relying on ULOE must file a separate notice with the Second that have adopted this form. Issuers relying on ULOE must file a separate notice with the Second that have been made. If a state requires the payment of a fee as a precondition to the claim for the exert this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix must be completed.	A notice is deemed filed with the U.S. Securities below or, if received at that address after the date on 0549.  ally signed. Any copies not manually signed must be eport the name of the issuer and offering, any riously supplied in Parts A and B. Part E and the less of securities in those states that have adopted curities Administrator in each state where sales are to nption, a fee in the proper amount shall accompany
ATTENTION  Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Converse	
not result in a loss of an available state exemption unless such exemption is predicated on the filing of a t	federal notice.

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1 of 9

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		A. BASIC IDE	NTIFICATION DATA			
Enter the information requ		=				
			within the past five years;			
<ul> <li>Each beneficial owners</li> <li>the issuer;</li> </ul>	r having the po	wer to vote or dispose,	or direct the vote or dispositio	n of, 10% or more	of a class of equit	y securities of
			of corporate general and mana	aging partners of p	artnership issuers;	and
o Each general and man	naging partner o	of partnership issuers.				
Check Box(es) that Apply:	] Promoter	Beneficial Owner	☐ Executive Officer	Director	Portfolio I	√lanager
Full Name (Last name first, if indi- Nexus Capital Limited					·	
Business or Residence Address c/o AIG International As		and Street, City, State, 2 at Ltd., 29 Richmond Re	Zip Code) oad, Pembroke HM08, Bermu	da		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	Portfolio I	Manager
Full Name (Last name first, if indi Davy, Darren C.						
Business or Residence Address c/o AIG International As		and Street, City, State, 2 at Ltd., 29 Richmond Re	Zip Code) oad, Pembroke HM08, Bermu	da		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	Investment	Manager
Full Name (Last name first, if indi DKR Capital Partners L.	.P.					
Business or Residence Address 1281 East Main Street, S		and Street, City, State, 2 ecticut 06902	Zip Code)	· · · · · · · · · · · · · · · · · · ·		
Check Box(es) that Apply:	] Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General P	
Full Name (Last name first, if indi DKR Management Com						
Business or Residence Address 1281 East Main Street, S		and Street, City, State, 2 ecticut 06902	Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	Owner of General Part Investment I	mer of the
Full Name (Last name first, if indi DKR Capital Inc.	vidual)	·				
Business or Residence Address 1281 East Main Street, S		and Street, City, State, 2 ecticut 06902	Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		□ Director	General a  Managing Pa	
Full Name (Last name first, if indi Davis, Gary S.	vidual)					
Business or Residence Address c/o DKR Capital Inc., 12		and Street, City, State, 2 Street, Stamford, Conne				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		□ Director	General a  Managing Pa	
Full Name (Last name first, if indi Klein, Barry L.	vidual)					
Business or Residence Address c/o DKR Capital Inc., 12		and Street, City, State, Z Street, Stamford, Conne				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General a Managing	
Full Name (Last name first, if indi Burger, Barbara	vidual)					
Business or Residence Address c/o DKR Capital Inc., 1.		and Street, City, State, 2 Street, Stamford, Conne			777	
0.004503.1						

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first, if Giordano, Anthony					
Business or Residence Addre c/o DKR Capital In		er and Street, City, State, Zip Street, Stamford, Connecti			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, in Maltby, John	findividual)				
Business or Residence Addre c/o DKR Capital In		er and Street, City, State, Zin Street, Stamford, Connecti			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre c/o DKR Capital In		er and Street, City, State, Zin Street, Stamford, Connect			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first, i Leif, Frederic	f individual)				
Business or Residence Addre c/o DKR Capital In		er and Street, City, State, Zin Street, Stamford, Connect			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, i Beaty, Laurie E.	f individual)				
Business or Residence Addre c/o DKR Capital Ir		er and Street, City, State, Zin Street, Stamford, Connect			
	(Use blar	nk sheet, or copy and use ad	ditional copies of this sheet,	as necessary.)	

				В.	INFORM	ATION AE	OUT OFF	ERING				
A	e issuer sold Answer also s the minim	in Append	lix, Columi	12, if filing	g under UL	OE.		_			No ⊠ •000,000*	
*	Subject to t	he discreti	on of the B	oard of Dir	rectors	-				Yes	No	
	ne offering p											
remune agent o		olicitation r dealer reg	of purchase gistered wit	ers in conne th the SEC	ection with and/or with	sales of sec	curities in t states, list t	he offering he name of	If a perso the broker	n to be liste or dealer.	d is an asse If more tha	similar ociated person or in five (5) persons
Full Name (Las	t name first,	if individu	ıal)									
Business or Res 1281 East Main	Street, Star	nford, CT	06902	eet, City, S	tate, Zip Co	ode)					<del>-</del> -	
Name of Associ	ecurities Co	rp. *DKR	Capital Sec				isdictions i	n which it i	s registered	i.	_	
States in which (Check "/	Person List All States" o				dicit Purcha	asers					⊠ All	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]	[ID] [MO] [PA] [PR]
Full Name (Las	t name first	, if individ	ual)									
Business or Res	sidence Add	ress (Num	ber and Str	eet, City, S	tate, Zip Co	ode)					_	
Name of Assoc	iated Broke	r or Dealer										
States in which (Check "A	Person List All States" o				olicit Purch	asers					— □ All	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]	[ID] [MO] [PA] [PR]
Full Name (Las	t name first	, if individ	ual)	<del></del>		···-			· · · · · · · · · · · · · · · · · · ·			
Business or Res	sidence Add	ress (Num	ber and Str	eet, City, S	tate, Zip C	ode)				····	_	
Name of Assoc	iated Broke	r or Dealer				<del></del>						
States in which (Check ".	Person List All States" o				olicit Purch	asers					— □ All	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]	[ID] [MO] [PA] [PR]
Full Name (Las	st name first	, if individ	ual)									
Business or Res	sidence Add	lress (Num	ber and Str	eet, City, S	State, Zip C	ode)					_	
Name of Assoc											_	
States in which (Check ".	Person List All States" o				olicit Purch	asers					□ A1	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]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$0	\$(	)
	Equity	\$500,000,000	- \$	15,200,000
	[ x ] Common [ ] Preferred	\$0	- \$0	·
	Convertible Securities (including warrants)	<u> </u>	- <del>-</del>	- **
	Partnership Interests			
	·			
	Other (Specify)	\$0	- \$	)
	Total	\$500,000,000	<u>\$</u>	15,200,000
	aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	A	Aggregate Dollar Amount of Purchases
	Accredited Investors		s	15,200,000
	Non-accredited Investors		_	
	Total (for filing under Rule 504 only)		\$	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering in Part C - Question 1.	ering. Classify seco	ırities	by type
3.	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.	ering. Classify second Type of	irities f	by type Dollar
3.	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offerings	ering. Classify seco Type o Securit	irities f	by type Dollar
3.	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering	ering. Classify secon Type of Securit	irities f	by type  Dollar  Amount Sold
3.	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering Rule 505	ering. Classify seco Type o Securit	irities f	by type  Dollar  Amount Sold
3.	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering Rule 505	Type of Securit	irities f	Dollar Amount Sold \$
4.	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering Rule 505	Type of Securities in this offering. Each of the future conting	f y 	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$ \$
	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering Rule 505	Type of Securit sin this offering. Ext to future conting e.	f y 	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$ \$
	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering Rule 505	Type of Securities in this offering. Exit to future contingue.	f y 	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities amounts relating solely to organization expenses of the issuer. The information may be given as subjeamount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	Type of Security secu	f y Excludencies	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering Rule 505	Type of Securit sin this offering. Extra to future conting e.	f y Excludencies	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$ \$ \$ \$  If the  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering Rule 505  Regulation A  Rule 504  Total  a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities amounts relating solely to organization expenses of the issuer. The information may be given as subject 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  Legal Fees	Type of Securities in this offering. Each to future contingue.	f yy xxclud encies x ] x ]	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$ \$ \$ \$  If the  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering Rule 505	Type of Securit sin this offering. Extra future conting te.	f yy xxclud encies x ] x ]	Dollar Amount Sold  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
	offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offelisted in Part C - Question 1.  Type of Offering Rule 505	Type of Security secu	f yy xxclud encies x ] x ]	Dollar Amount Sold \$\frac{\$}{\$}\$\$ \$\$\$ \$\$\$ \$\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$

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	b. Enter the difference between the aggregate offerin expenses furnished in response to Part C - Question 4 issuer."	.a. This difference is t	he "ad	juste	d gross proc	eeds to the	•		\$499,900,000	
5.	Indicate below the amount of the adjusted gross proceshown. If the amount for any purpose is not known, total of the payments listed must equal the adjusted grabove.	furnish an estimate and	l check	the	box to the le	ft of the e	stim	nate.	The	6.74
					Paymen Office Director Affilia	rs, ·s, &			Payments to Others	
	Salaries		[	]	\$		[	]	\$	
	Purchase of real estate		[	]	\$			]	\$	
	Purchase, rental or leasing and installation of machine	ery and equipment	[	]	\$			]	\$	
	Construction or leasing of plant buildings and facilities	es	[	]	\$		[	]	\$	
	Acquisition of other businesses (including the value of involved in this offering that may be used in exchang securities of another issuer pursuant to a merger)	e for the assets or	. [	]	\$	<del></del>	[	]	\$	
	Repayment of indebtedness		[	]	\$			]	<u>\$</u>	
	Working capital		[	]	\$		[	]	\$	
	Other (specify):Investment Capital in NEXUS	DKR Macro	[	x ]	\$499,900	,000	[	]	\$	
	Holding Fund Ltd.									
	Column Totals		[	x ]	\$499,900	,000	[	]	\$	
	Total Payments Listed (column totals added)				[ :	x ] <u>\$49</u>	9,90	00,0	00	
		D. FEDERAL S	SIGNA	TUR	.E					
con	issuer has duly caused this notice to be signed by the stitutes an undertaking by the issuer to furnish to the Uer to any non-accredited investor pursuant to paragraph	S. Securities and Exc								
Issu	er (Print or Type) Signatu	IIE //			Da	ate A.	ان	12	7 8/1C	
NE:	KUS DKR Macro Fund Ltd.	Ful Cen				MY	(	12	,2005	
Nar	ne of Signer (Print or Type)  Title of  Bradford Caswell	Signer (Print or Type Authorized Sign	atory							

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

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E. STA		

Yes

Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?......

Not Applicable

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. Not Applicable
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. Not Applicable
- The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. Not Applicable

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
NEXUS DKR Macro Fund Ltd.	Des Ceon	April 13,2005
Name (Print or Type)	Title (Print or Type)	
Bradford Caswell	Authorized Signatory	

### 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.

## APPENDIX

# NEXUS DKR MACRO FUND LTD.

1	1												
1	Intend to non-accommendate investors (Part B-:	sell to redited in State	Type of security and aggregate offering price offered in state  Type of investor and amounts and amounts are state of the security and amounts are security and a s			Type of investor and amount purchased in State (Part C-Item 2)							
Q			Common Stock U.S. \$1.00 per Share	Number of Accredited	•	Number of Non- Accredited Investors			N				
State	Yes	No	\$500,000,000	Investors	Amount	Investors	Amount	Yes	No				
AL							<del></del>						
AK	ļ <u>-</u>					-							
AZ													
AR	-	<del>                                     </del>			<del></del>								
CA	<del>                                     </del>	<u> </u>					<del> </del>						
CT		-											
DE													
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GA		<u> </u>				-	<del></del>						
HI					<del></del>		<del></del>						
ID	<del></del>												
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	NEXUS DKR MACRO FUND LTD.  1 2 3 4 5													
1	Intend to non-accr investors (Part B-I	edited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of	Not Ap Disqual under Sta (if yes explan waiver	plicable ification ite ULOE , attach ation of granted) -Item 1)								
State	Yes	No	Common Stock U.S. \$1.00 per Share \$500,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No					
NV														
NH														
NJ														
NM														
NY		X	X	1	\$15,200,000	0	0							
NC														
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OR					<u>.</u>									
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