FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 205495 RECEIVED

DEC 1 5 2005

FORM D

NOTICE OF SALE OF SECURITIES 203
PURSUANT TO REGULATION D;
SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

1347616

OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008

Estimated Average burden hours per form 16.00

SEC USE ONLY

Prefix Serial

DATE RECEIVED

Name of Offering: ROCK CREEK GEORGE represented as Class A/Class B Shares, Class					ares, par value \$0.01 per share,		
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	☑ Rule 506	☐ Section 4(6)	☐ ULOE		
Type of Filing:	➤ New Filing	☐ Amendment	······································		BBAAECCE		
	A. B.	ASIC IDENTIFICA	TION DATA		<u> </u>		
1. Enter the information requested about the is	suer						
Name of Issuer (check if this is an am	endment and name has	s changed, and indica	te change.)		DEC 2 2 2003		
ROCK CREEK GEORGETOWN FUND, L'	ΓD.						
Address of Executive Offices c/o Ogier Fiduciary Services (Cayman) Limited Grand Cayman, Cayman Islands	(Number	and Street, City, State South Church Street,		Telephone Number (Inc. (416) 969-6700 (c/o Cito Administrator)	luding Area Code) HOWSON_ co (Canada) Inc., 际内ANCIAL		
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)							
Brief Description of Business: To operate a	s a private investn	nent fund.					
Type of Business Organization			····				
☐ corporation	☐ limited partners	ship, already formed	X	other (please specify): a Ca	ayman Islands exempted company		
☐ business trust	☐ limited partners	ship, to be formed					
Actual or Estimated Date of Incorporation or C	Organization:	Monti I 0	Yea 0	5 🗷 Actual	☐ Estimated		
Jurisdiction of Incorporation: (Enter two-letter CN for Canad	U.S. Postal Service Al da; FN for other foreign			F	N		

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.

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 predicated on the filing of a federal notice.

I

		A. BASIC IDENTI	EICATION DATA								
2. Enter the informatio	n requested for the fo		FICATION DATA								
• Each promoter of the issuer, if the issuer has been organized within the past five years;											
	 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 beneficial own	er naving the power t	o vote or dispose, or direct the v	ote or disposition of, 10% or	more of a class of ec	juity sec	urities 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.											
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	□ Director		General and/or					
Check Box(es) that Approx.	- Promotes	Delichelal Owlie	Executive Officer	E Director		Managing Partner					
Full Name (Last name first, if in	ndividual)				**						
BESCHLOSS, AFSANEH											
Business or Residence Address	(Number and Street	t, City, State, Zip Code)									
c/o The Rock Creek Group, LP,	1133 Connecticut A	venue, N.W., Washington, D.C.	20036								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director		General and/or					
						Managing Partner					
Full Name (Last name first, if in	ndividual)										
KRISHNAMURTHI, SUDHIF	k, DBA		•								
Business or Residence Address	(Number and Street	t, City, State, Zip Code)									
c/o The Rock Creek Group, LP,	1133 Connecticut A	venue, N.W., Washington, D.C.	20036								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director		General and/or					
						Managing Partner					
Full Name (Last name first, if ir	ndividual)										
SEYMOUR, DON											
Business or Residence Address	(Number and Street	, City, State, Zip Code)									
c/o dms Management Ltd., P.O.	Box 31910 SMR 2nd	Floor Anshacher House 20 G	enesis Close George Town G	Frand Cayman Cayn	nan Isla	nds					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or					
	11011000					Managing Partner					
Full Name (Last name first, if ir	ndividual)										
BREE, DAVID											
Business or Residence Address	(Number and Street	, City, State, Zip Code)									
c/o dms Management Ltd., P.O.	,		enecic Close George Town G	Frand Couman Coun	aan Iclaa	nds					
Check Box(es) that Apply:			Executive Officer			General and/or					
Check Box(cs) that Apply.	L Homote	Delicticial Owlice	L'Acculive Officer	E Director	_	Managing Partner					
Full Name (Last name first, if ir	ndividual)					······································					
Brinkley, Blair											
Business or Residence Address	(Number and Street	, City, State, Zip Code)	· Lumma			. , , , , , , , , , , , , , , , , , , ,					
		· · · ·									
c/o dms Management Ltd., P.O.	□ Promoter	Beneficial Owner	Executive Officer								
Check Box(es) that Apply:	Li Promoter	Beneficial Owner	Executive Officer	☐ Director		General and/or Managing Partner					
Full Name (Last name first, if ir	ndividual)					Trianaging I arrier					
	·										
Business or Residence Address	(Number and Street	, City, State, Zip Code)									
	(* 13111211 1111 1111 1111	, •,, •,,									
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or					
Check Box(es) that Apply.	Li Fiolilotei	Denencial Owner	Executive Officer	□ Director		Managing Partner					
Full Name (Last name first, if individual)											
•											
Business or Residence Address	(Number and Street	, City, State, Zip Code)									
	,										
	(Use bla	nk sheet, or copy and use additi	onal copies of this sheet, as ne	cessary.)							
	, 5 514	,									

					<u>B.</u> I	NFORMA	ATION A	BOUT OF	FFERINC	}				
													Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									\times					
Answer also in Appendix, Column 2, if filing under ULOE.														
2. What is the minimum investment that will be accepted from any individual?									\$ <u>5,000,</u>	000*_				
*(Or any lesser amount subject to the discretion of the Board of Directors).														
													Yes	No
3. Does the	offerir	ng permit	joint owner	ship of a si	ngle unit?					•••••			X	
solicitati registere	on of p	ourchasers the SEC a	in connec and/or with	tion with s a state or s	ales of sec tates, list th	urities in tl	he offering the broker	. If a perso or dealer. I	on to be lis	ted is an a	ssociated p	erson or ag	similar remun ent of a broke ssociated perso	er or dealer
Fuli Name (La	ast nam	e first, if i	ndividual)											
NONE														
Business or Re	esidenc	e Address	(Number a	and Street, (City, State,	Zip Code)								 .
Name of Asso	ciated	Broker or	Dealer											
States in Whice	ch Pers	on Listed	Has Solicit	ed or Intend	s to Solicit	Purchasers	3							
(Check '	'All Sta	ates" or ch	eck individ	ual States)									🗖 All St	ates
[A]	-	[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]	
[M [R]		[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 (La				, <u>,</u>										
Business or Re	esidenc	e Address	(Numbe	r and Street	, City, Stat	e, Zip Code)							
Name of Asso	ciated	Broker or	Dealer				· · · · · · · · · · · · · · · · · · ·							
States in Whic	h Perso	on Listed I	Has Solicite	ed or Intend	ls to Solicit	Purchasers	5							
(Check "	'All Sta	ites" or ch	eck individ	ual States)										ates
(A)		[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]	
[M	-	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI Full Name (La		[SC] e first, if i	[SD] ndividual)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
,		•	,											
Business or Re	esidenc	e Address	(Number	and Street	, City, State	e, Zip Code					***************************************			
Name of Asso	ciated !	Broker or	Dealer	mand are arradayle as re			····						***************************************	
States in Whic	h Perso	on Listed 1	Has Solicite	ed or Intend	ls to Solicit	Purchasers	3							
(Check "	'All Sta	ites" or ch	eck individ	ual States)						•••••		*************	🗖 All St	ates
[A]	L]	[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]	
[M	Π]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	

[TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 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 \(\sigma\) and indicate in the columns below the amounts of securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price (1) Sold (2) Debt Equity ☐ Common ☐ Preferred Convertible Securities (including warrants)..... Partnership Interests Other (specify) (Limited-voting participating redeemable shares, par value \$0.01 per share, represented as Class A/Class B Shares, Class C/Class D Shares, Class E/Class F Shares and Class G/Class H Shares.) \$500,000,000 \$40,000,000 Total..... \$500,000,000 \$40,000,000 Answer also in Appendix, Column 3, if filing under ULOE. 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 Dollar Amount investors of Purchases (2) \$40,000,000 Accredited Investors N/A N/A Non-accredited Investors Total (for filings under Rule 504 only)..... N/A N/A Answer also in Appendix, Column 4, if filing under ULOE. 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. Dollar Amount Type of offering Type of Security Sold Rule 505..... N/A N/A Regulation A N/A N/A N/A N/A N/A Total..... Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this

 Printing and Engraving Costs.
 ▼
 \$ 10,000

 Legal Fees.
 ▼
 \$ 225,000

 Accounting Fees.
 ▼
 \$ 15,000

 Engineering Fees.
 ▼
 \$ 0

 Sales Commissions (specify finders' fees separately)
 ▼
 \$ 0

 Other Expenses (identify) (Offering, issuance and listing fees)
 ▼
 \$ 150,000

Other Expenses (identify)
(Offering, issuance and listing fees)
X
\$ 150,000

Total
X
\$ 400,000 (3)

(1) The Issuer is offering a series of limited-voting participating redeemable shares, par value \$0.01 per share, on a continuous basis. The amount reflected is provided

for the purpose of filing this Form D.

⁽²⁾ The amount and number sold may reflect sales to U.S. and non-U.S. persons.

⁽³⁾ The amount reflects an estimate of initial costs only.

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS							
5.	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the	\$ <u>499.600,000</u>						
	left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set							
	forth in response to Part C - Question 4.b above.							
			Payments to Officers, Directors, and Affiliates		Payments to Others			
	Salaries and fees	X	\$ <u>(4)</u>	X	\$_(5)			
	Purchases of real estate		\$		\$			
	Purchase, rental or leasing and installation of machinery and equipment		\$		\$			
	Construction or leasing of plant buildings and facilities		\$		\$			
	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)		\$		\$			
	Repayment of indebtedness		\$		\$			
	Working capital		\$		\$			
	Other (specify): Investments.		\$	X	\$ <u>499,600,000</u>			
	Column Totals	X	\$ (4)	X	\$ <u>499,600,000</u>			
	Total Payments Listed (column totals added)	≥ \$499,600,000						
ma ma	The Rock Creek Group, LP ("TRCG"), an affiliate of the Issuer, serves as the Issuer's Investment M nagement fee and an annual performance allocation. The Issuer's confidential offering materials se nagement fee and performance allocation. The Issuer will pay an annual fee to its Administrator and any Sub-Administrator.							
	D. FEDERAL SIGNATURE							
an 1	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed unundertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its state-accredited investor pursuant to paragraph (b)(2) of Rule 502.	der R ff, th	ule 505, the follo e information fun	wing sig	nature constitutes y the issuer to any			

ATTENTION

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

December 12, 2005

Signature

Director

Title of Signer (Print or Type)

Issuer (Print or Type)

Name of Signer (Print or Type)

SUDHIR KMCHNAMURTH

ROCK CREEK GEORGETOWN FUND, LTD.