FORM D

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

FORM D

EXECUTED

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per form......16

OMB APPROVAL



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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			, , ,		
Name of Offering (check if this is an a	imendment and name has cha	nged, and indicate change.)	4		
Purchase of Limited Partnership Intere	ests in Makena Capital Asso	ciates (Cayman), L.P. (the	"Partnermip")	-	
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Pale 505	Z Rule 506	☐ Section 4(6)	☐ ULOE
Type of Filing:		New Filing]	☐ Amendment	
	A. Ba	ASIC IDENTIFICATION	DATA		
1. Enter the information requested about	it the issuer				
Name of Issuer (check if this is an ame	endment and name has chang	ed, and indicate change.)			
Makena Capital Associates (Cayman),	L.P.				
Address of Executive Offices	(Number and	Street, City, State, Zip Cod	e) Telephone Numb	er (Including Area Co	de)
c/o Makena Capital Management, LLC	C, 2500 Sand Hill Road, Mer	ilo Park, California 94025	650.926.0510		
Address of Principal Business Operations	(Number and Street, City, St	ate, Zip Code)	Telephone Numb	er (Including Area Co	de)
(if different from Executive Offices)				PROCE	
Brief Description of Business					COODED
Investment vehicle				Allega	
Type of Business Organization					ZIIIR ,—
□ corporation	🗷 limited partnership, a	lready formed	□ other:	THOMAS	
□ business trust	☐ limited partnership, to I	oe formed		FINANC	on ~
		<u>Month</u>	Year		AL
Actual or Estimated Date of Incorporation	n or Organization:	06	2006	(d) 1 (1)	
Jurisdiction of Incorporation or Organizat	ion: (Enter two-letter ITS	5. Postal Service abbreviatio	n for State:	Actual	☐ Estimated
varisation of meorporation of Organizat		for other foreign jurisdiction		DE	

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.

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 control number.



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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. Check Boxes ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director **⊠**General Partner of the that Apply: Partnership (the "General Partner") Full Name (Last name first, if individual) Makena Capital Management, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 2500 Sand Hill Road, Menlo Park, California 94025 Check Boxes ☐ Beneficial Owner ☐ Executive Officer ☐ Director ■ Manager of the General ☐ Promoter that Apply: Partner Full Name (Last name first, if individual) Michael G. McCaffery Business or Residence Address (Number and Street, City, State, Zip Code) c/o Makena Capital Management, LLC, 2500 Sand Hill Road, Menlo Park, California 94025 Check ☐ Beneficial Owner ☐ Executive Officer ☐ Director ■ Manager of the General ☐ Promoter Box(es) that Partner Apply: Full Name (Last name first, if individual) Michael L. Ross Business or Residence Address (Number and Street, City, State, Zip Code) c/o Makena Capital Management, LLC, 2500 Sand Hill Road, Menlo Park, California 94025 Check ☐ Beneficial Owner ☐ Executive Officer ☐ Director ■ Manager of the General ☐ Promoter Box(es) that Partner Apply: Full Name (Last name first, if individual) David C. Burke Business or Residence Address (Number and Street, City, State, Zip Code) c/o Makena Capital Management, LLC, 2500 Sand Hill Road, Menlo Park, California 94025 Check Boxes ☐ Director ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Manager of the General that Apply: Partner Full Name (Last name first, if individual) Susan Meaney Business or Residence Address (Number and Street, City, State, Zip Code) c/o Makena Capital Management, LLC, 2500 Sand Hill Road, Menlo Park, California 94025 Check Boxes ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Manager of the General that Apply: Partner Full Name (Last name first, if individual) Jeffery J. Mora Business or Residence Address (Number and Street, City, State, Zip Code) c/o Makena Capital Management, LLC, 2500 Sand Hill Road, Menlo Park, California 94025 Check Boxes Beneficial Owner Other ☐ Promoter ☐ Executive Officer ☐ Director that Apply: Full Name (Last name first, if individual) Bei Shan Tang Foundation Business or Residence Address (Number and Street, City, State, Zip Code) 21st Floor, One Hysan Avenue, Causeway Bay, HONG KONG Check Box(es) ☐ Executive Officer ☐ Other ☐ Promoter ☐ Beneficial Owner ☐ Director that Apply: Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ Other that Apply: Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

A. BASIC IDENTIFICATION DATA

Enter the information requested for the following:

	*, ,			В.	INFORM	ATION AB	OUT OFFE	RING				
1. Ha	as the issuer sold, or	does the issu	er intend to					under ULOE			Yes N	0 <u>X</u>
2. W	hat is the minimum	investment th	nat will be ac	ccepted fron	n any indivi	dual?					N/A	
3. Do	oes the offering per	mitjoint own	ership of a si	ngle unit?			***************************************		(1111)	•••••	Yes X N	0
of SE	nter the information purchasers in conne C and/or with a sta u may set forth the	ection with sa te or states, li	les of securi st the name of	ties in the o of the broke	ffering. If a r or dealer.	person to be	listed is an	associated per	rson or agent of	of a broker or	dealer regis	tered with the
					N	OT APPLIC	CABLE					
Full Na	me (Last name first	, if individual	1)				-					
	(•									
Busines	ss or Residence Ado	Iress (Numbe	r and Street,	City, State,	Zip Code)				······································			
Name c	of Associated Broke	r or Dealer										
Ct-t:	n Which Person Lis	+- 1 II C-1	tand on Year	1-4- C-11-2	D				· · · · · · · · · · · · · · · · · · ·			
	"All States" or che											All States
[AL]	[AK]		[AR]	[CA]	[CO]	[CT]			[FL]	[GÀ]	[HI]	[ID]
[IL]	[AN]	[AZ] [IA]	[KS]	[KY]	[LA]	[ME]	[DE] [MD]	[DC] [MA] .		[GA] [MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	ISCI	[SD]	[TN]	[TX]	JUTI	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	IPR]
	me (Last name first			. [171]	1011	17.41	[7 2 2]	1 4 2 5 1		1 *** 21	1 ** * 1	1, 10,
Busines	ss or Residence Add	lress (Numbe	r and Street,	City, State,	Zip Code)							
Name o	of Associated Broke	er or Dealer										
States i	n Which Person Lis	ted Has Solic	ited or Inten	ds to Solici	Purchasers							
(Check	"All States" or che	ck individual	States)		• • • • • • • • • • • • • • • • • • • •							All States
[AL]	[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]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last name first	, if individua	1)									
D	D 11 . A.I	1 01 1	1.64 . 4	C: C:	7 1 (0.15)						 	
Busines	ss or Residence Ado	iress (Numbe	r and Street,	City, State,	Zip Code)							
Name o	of Associated Broke	er or Dealer										
		0. 20001										
States i	n Which Person Lis	ted Has Solic	ited or Inten	ds to Solicit	Purchasers					<u>.</u>		
(Check	"All States" or che	ck individual	States)									All States
[AL]	[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]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]

(VT)

[VA]

[VA]

[WV]

[WI]

[PR]

[WY]

[RI]

[SC]

[SD]

[TN]

[TX]

[UT]

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

	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$10,000,000.00	\$10,000,000.00
	Other (Specify:)	\$	\$
	Total	\$ <u>10,000,000.00</u>	\$10,000,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		•
<u>!</u> .	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."		
		Number	Aggregate
		Investors	Dollar Amount
			of Purchases
	Accredited Investors	1	\$10,000,000.00
	Non-accredited Investors	0	\$0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
٠.	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	Dollar Amount
		Security	Sold
	Type of Offering		
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total	 	\$
	a. Furnish a statement of all expenses inconnection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. 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		
	Accounting Fees		
	Engineering Fees.		
	Sales Commissions (specify finders' fees separately)		
	Other Expenses (Specify)		\$
	Total		\$

	OF INVESTORS, EXPENSES AND USE OF PROCEEDS	
b. Enter the difference between the aggregate offering price give furnished in response to Part C – Question 4.a. This different		\$10,000,000.00
 Indicate below the amount of the adjusted gross proceeds to the issue If the amount for any purpose is not known, furnish an estimate and c payments listed must equal the adjusted gross proceeds to the issuer s 	check the box to the left of the estimate. The total of the	Payment To Others
Salaries and fees		□ \$
Purchase of real estate	L 3	□ \$
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 n exchange for the assets or securities of another issuer pursuant to a merg	ger)	□ \$
Repayment of indebtedness	<u> </u>	
Working capital (a portion of the working capital will be used to pay whe life of the Partnership, payable to the General Partner	· · · · · · · · · · · · · · · · · · ·	× \$10,000,000.00
Other (specify):	□ 3	□ \$
		□ \$
Column Totals	j <u></u>	▼ \$ <u>10,000,000.00</u>
Total Payments Listed (column totals added)	S10,000.	000.00
D. F	FEDERAL SIGNATURE	
The issuer had duly caused this notice to be signed by the undersigned dul un undertaking by the issuer to furnish to the U.S. Securities and Exchange	y authorized person. If this notice is filed under Rule 505, the for authorized person, upon written request of its staff, the information	ollowing signature constitut furnished by the issuer to a
on-accredited investor pursuant to paragraph (b)(2) of Rule 502.		
ssuer (Print or Type)	Signature	Date 2006
son-accredited investor pursuant to paragraph (b)(2) of Rule 502. ssuer (Print or Type) Makena Capital Associates (Cayman), L.P. Jame of Signer (Print or Type)	Signature MMM Title of Signer (Print or Type)	Date July L., 2006

ATTENTION

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

	W							
	ı	E. STATE SIGNATURE	ن در					
1,	Is any party described in 17 CFR 230.262 presently subject to any of	of the disqualification provisions of such rule?	Yes	No 🗷				
	See Appe	ndix, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnish to the state additimes as required by state law.	ministrator of any state in which the notice is filed, a notice on Form D (17	CFR 239.50	0) at such				
3.	The undersigned issuer hereby undertakes to furnish to any state ad	ministrators, upon written request, information furnished by the issuer to o	offerees.					
4.	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.							
The per:		d has duly caused this notice to be signed on its behalf by the undersigned	duly authori	zed _				
lssu	er (Print or Type)	Signature Da	te	!				
Ma	kena Capital Associates (Cayman), L.P.	MGMell	y <u>1S.</u> , 2006	•				
Nar	ne (Print or Type)	Title (Print or Type) A Manager of Makena Capital Management (Cayman), LLC whice General Partner of Makena Capital Associates (Cayman), L.P.	h serves as t	he sole				

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									
1		2	3		4				5
	to non- investo	nd to sell accredited ors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State			under Sta yes, explanation granted (lification te ULOE (if attach on of waiver Part E-Item 1)
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
СО									
CT									
DE								-	
DC									
FL					VIIVII				
GA									
HI									
ID	100								
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lA									
KS									
KY									
LA									
MA	·								
MD					<u> </u>				
ME									
MI									
MN									
MS									
МО	-								

APPENDIX 2 3 4 Disqualification under Type of security State ULOE (if yes, attach explanation of and aggregate Intend to sell Type of investor and to non-accredited offering price offered in state (Part C-Item 1) amount purchased in State (Part C-Item 2) investors in State waiver granted (Part E-Item 1) (Part B-Item 1) Yes No Limited Number of Amount Number of Amount Yes No State Partnership Accredited Non-Interests Investors Accredited Investors MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR