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 UNIFORM LIMITED OFFERING EXEMPTION

OMB Approval

OMB Number: 3235-0076

Expires: April 30, 2008

Estimated average burden



Name of Offering (check if this is an amendment and name has changed, and indicate change.) FECE Section 4(6) Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 □ Rule 506 ULOE Type of Filing: ☐ New Filing A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer (check if this is an amendment and name has changed, and indicate change.) Name of Issuer Hedge Strategy Fund, L.L.C. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 20820 Chagrin Blvd., Suite 300, Shaker Heights, OH 44122 216/491-3990 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) PROCESSED (if different from Executive Offices) Brief Description of Business MAR 0 8 2007 Investment Fund Type of Business Organization limited partnership, already form thomson corporation other (please specify): business trust limited partnership, to be formed FINANCIAL limited liab, company Month Year Actual or Estimated Date of Incorporation or Organization: 2 9 7 ☐ Estimated \times Actual Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State; CN for Canada; FN for other foreign jurisdiction) ОН

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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A. BASIC IDENTIFICATION DATA

- 2. 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; Fach executive officer and director of cornerate issuers and of cornerate general and managing partners of partnership

issuers; and Each general and ma		f partnership issuers.	i corporate general and i	nanaging partne	is of partnership
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and Managing Partner
Full Name (Last name first, if Terence C. Sullivan	individual)				
Business or Residence Addres 20820 Chagrin Blvd., Suite 300, Shal			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General Partner or Managing Member
Full Name (Last name first, if Falmouth Investment Compar	•				
Business or Residence Addres 20820 Chagrin Blvd., Suite 300, Sha			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	`individual)				
Business or Residence Addres	ss (Number and S	Street, City, State, Zip C	ode)	•	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	ss (Number and S	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	`individual)				
Business or Residence Address	ss (Number and S	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	ss (Number and S	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	ss (Number and S	Street, City, State, Zip C	ode)		

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

							B. IN	IFORI	MATIC	N AB	O TUC	FFER	ING					
1.	Has the	issuei	r sold o										ng?		Yes		No ⊠	
2.	What is	the m	ninimun	n investr	nent tha	t will be	e accepte	ed from	any ind	ividual?	*					\$ 100	000,	
	*(Subje	ct to I	ssuer's	discretio	on to acc	ept less	er inves	tments)	-						Yes		No	
3.	Does th	e offe	ring per	mit join	t owner	ship of a	single	unit?	• • • • • • • • • • • • • • • • • • • •						\boxtimes			
1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?																		
Full	Name	(Last	name 1	first, if	individ	ual)												
Bus	iness or	Resi	dence .	Addres	s (Num	ber and	Street	, City,	State, Z	Lip Cod	e)							
Nan	ne of As	ssocia	ited Br	oker or	Dealer			<u> </u>			•							
															All S	tates		
-	-	-	[AZ]						[DC]	[FL]	[GA]							
-																		
							[*1]	[17]	[**/-]	[***]	[**']	[,,,]	Įr i Nj					
		`																
Bus	iness or	Resi	dence /	Addres	s (Num	ber and	l Street,	, City,	State, Z	ip Cod	e)	·						
Nan	ne of As	ssocia	ited Br	oker or	Dealer	•						•						
														П	All S	tates		
														_				
[11]	-] [[IN]	[AI]	[KS]	[KY]							[MS]						
[M	T) [i	NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]					
	· · ·						[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]					
*(Subject to Issuer's discretion to accept lesser investments) 3. Does the offering permit joint ownership of a single unit? 4. Eiter the information requested for each person who has been or will be paid or given, directly or statistically, any commission or similar manufacture of the information requested for each person who has been or will be paid or given, directly or statistic or information for similar manufacture of the information for the information for with a state or states, list the name of the broker or dealer. If more than five (3) persons to be listed are associated persons of such a broker or dealer. If more than five (3) persons to be listed are associated persons of such a broker or dealer. If more than five (3) persons to be listed are associated persons of such a broker or dealer. If more than five (3) 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. None Full Name (Last name first, if individual) Business or Residence Address (Number and 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)																		
Bus	iness or	Resi	dence a	Addres	s (Num	ber and	Street,	City,	State, Z	ip Cod	e)							
Nan	ne of As	ssocia	ited Br	oker or	Dealer				·									
									Solicit I	urchas	ers				All S	tates		
-							•		[DC]	[FL]	[GA]	[HI]	[ID]					
											-							
[M	T] [(NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]					
[R	1] [(SC)	[SD]	[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

1.	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 \(\square\$\) and indicate in the column below the amounts of the securities offered for exchange and already exchanged				
	Type of Security				
			Aggregate Offering Price	A	mount Already Sold
	Debt	S _	0	\$	0
	Equity	\$_	0	S	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$_	0	\$	0
	Partnership Interests	\$	0	\$	0
	Other (specify)limited liability company membership units	\$	100,000,000	\$	69,302,488
	Total	\$	100,000,000	\$	69,302,488
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	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 Investors		Aggregate Oollar Amount of Purchases
	Accredited Investors		98	S	69,302,488
	Non-accredited Investors	_	0	\$	0
	Total (for filings under Rule 504 only)		N/A	S	N/A
	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	Ε	Oollar Amount
			Security		Sold
	Rule 505	_	N/A	\$	0
	Regulation A		<u>N/A</u>	\$	0
	Rule 504	_	<u>N/A</u>	S	0
	Total		N/A	\$	0
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 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		\boxtimes	s	4,000
	Accounting Fees			\$	
	Engineering Fees			s	
	Sales Commissions (Specify finder's fees separately)			\$	
	Other Expenses (identify)		ī	\$.
	Total		ī	s	4,000
			_	-	

Purchase, rental or leasing and installation of machinery and equipment	is the "adjusted	d d c e	Payments Officers Directors, Affiliate	to ., &		
for each of the purposes shown. If the amount for any purpose is not known, furn and check the box to the left of the estimate. The total of the payments listed adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.b. ab Salaries and fees	ish an estimatemust equal theove	e e I S	Officers Directors, Affiliate	, &		D
Purchase of real estate		\$	Officers Directors, Affiliate	, &		р . т
Purchase of real estate			. 0			Others
Purchase, rental or leasing and installation of machinery and equipment		\$		_ 🗆	\$	00
Construction or leasing of plant buildings and facilities			0	_ 🗆	\$	0
		\$	0	_ 🗆	s	0
Acquisition of other husinesses (including the value of securities involved in this		\$	0	_ 🗆	\$	0
offering that may be used in exchange for the assets or securities of another issue	êг	s	0		ç	0
	_	°			ς - Ψ	
		\$				
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omer (specify) 1 menase of investments	_ _	\$	0		\$	99,996,000
	ished in response to Part C-Question 4.a. This difference is the "adjusted er." In of the adjusted gross proceeds to the issuer used or proposed to be used shown. If the amount for any purpose is not known, furnish an estimate tell of the estimate. The total of the payments listed must equal the other issuer set forth in response to Part C-Question 4.b. above Payments to Officers, Directors, & Payments To Officers, Directors, & Payments To Officers of Affiliates of Officers, Directors, & Payments To Officers of Affiliates of Officers of Affiliates of Officers of Affiliates of Officers of Affiliates of Officers					
Purchase, rental or leasing and installation of machinery and equipment						
signature constitutes an undertaking by the issuer to furnish to the U.S. Securities at	nd Exchange (Commission.	is filed u , upon w	nder Ri	ule 50: equest	5, the following of its staff, to
Issuer (Print or Type) Signature		Date				
Hedge Strategy Fund, L.L.C.	<u> 化</u>	2/2	3/20	707		
Name of Signer (Print or Type) Title of Signer (Print or Type)						
Terence C. Sullivan President of Falmouth Investment	Company, Inc	c., Manager	Member			
- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		• • • • • • • • • • • • • • • • • • • •	igner (Print or Type)	igner (Print or Type)	igner (Print or Type)	igner (Print or Type)
			·- ·-		4004	

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 preser	ntly subject to any of the disqualification provisions of such rule?	Yes	No ⊠					
		See Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to fu D (17 CFR 239.500) at such times as required b	rnish to any state administrator of any state in which this notice is filed, a notic y law.	e on For	m					
3.	The undersigned issuer hereby undertakes to fu to offerees.	rnish to the state administrators, upon written request, information furnished by	the issu	er					
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.									
	e issuer has read this notification and knows the lersigned duly authorized persons.	e contents to be true and has duly caused this notice to be signed on its bel	nalf by tl	ie					
issi	uer (Print or Type)	Signature Date							
He	dge Strategy Fund, L.L.C.	- Chl 423/2007							
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)							
Тет	ence C. Sullivan	President of Falmouth Investment Company, Inc., Manager Member							

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.

 \mathbb{END}