

# 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: ......
Estimated average burden
hours per response .........16.00

SEC U	SE ONLY
Prefix	Serial
DATE	RECEIVED
•	1

Name of Offering ( check if this an amendment and name has changed, and indicate change.) Cadogan Opp	portunistic Alternatives Fund, LLC		
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐ Section 4(6) ☐ UL	OE		
Type of Filing: New Filing Amendment	A (CAN) ARM (CAN ROWS (CAN RIPE (IR) III) RACE (IR)		
A. BASIC IDENTIFICATION DATA			
Enter the information requested about the issuer			
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	07074512		
Cadogan Opportunistic Alternatives Fund, LLC			
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)		
149 5th Ave, 15th Floor, New York, NY 10010	(212) 585-1600		
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			
investment Fund			
Type of Business Organization			
☐ corporation ☐ limited partnership, already formed ☐ other (plead of business trust ☐ limited partnership, to be formed	ase specify): Delaware limited liability company PROCESSED		
Month Year			
Actual or Estimated Date of Information or Organization 10 2004 Actual Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State;	☐ Estimated		
CN for Canada; FN for other foreign jurisdiction)	DE THOMSON		
GENERAL INSTRUCTIONS	FINANCIAL		
Federal:			
Who must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	r Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.		

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 of 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

SEC 1972 (6-02)

Persons who 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

A. BASIC IDENTIFICATION DATA
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>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.</li> <li>Each executive officer and director of corporate issuers and corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>
Check Box(es) that Apply:  Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Cadogan Management, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)  149 5th Ave, 15th Floor, New York, NY 10010
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Jenal, Matthew
Business or Residence Address (Number and Street, City, State, Zip Code) 149 5th Ave, 15th Floor, New York, NY 10010
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)  Kruli, Steven
Business or Residence Address (Number and Street, City, State, Zip Code)  149 5th Ave, 15th Floor, New York, NY 10010
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Romans, Donald
Business or Residence Address (Number and Street, City, State, Zip Code) 149 5th Ave, 15th Floor, New York, NY 10010
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Waldron, Michael
Business or Residence Address (Number and Street, City, State, Zip Code)  149 5th Ave, 15th Floor, New York, NY 10010
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)  Lee, William
Business or Residence Address (Number and Street, City, State, Zip Code) 149 5th Ave, 15th Floor, New York, NY 10010
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B.	INFORMA	TION ABOU	T OFFERIN	NG				
1.	Has the is	suer sold,	or does the i	ssuer intend t				s offering?			••••••	Yes	No ⊠
2.	What is th	ne minimu	m investmen				_					\$ <u>25,000</u>	-
_		~ ·		1. 6	1 1 10	1						Yes ⊠	No □
4.	Enter the similar rea associated dealer.	informatio muneratio I person o If more th	on requested n for solicita r agent of a l	for each perstion or purchas proker or deal persons to b	son who has users in conne er registered	been or will ection with sa with the SEC	be paid or gi les of securit and/or with	ven, directly ies in the offe a state or sta th a broker o	or indirectly, ring. If a per tes, list the na	any commis son to be liste ame of the br	sion or ed is an oker or		
N/A				•									
								-					
	(Check "A	Ali States"	or check inc	lividual State:	s)							☐ All St	ates
A	L	AK	AZ	AR	CA	CO	СТ	DE	DC	FL	GA	ні	ID
Į.	_	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
М	Т	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
R	I	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
Busin	ness or Res	sidence A	ddress (Num	ber and Street	, City, State,	Zip Code							
State				licited or Inte				.,,				☐ All St	ates
Α	ı	AK	AZ	AR	CA	со	СТ	DE	DC	FL	GA	HI	lD
11	_	IN	IA	KS	KY	LA	ME	MD	MA	МІ	MN	MS	МО
М	т	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
R	.I	SC	SD	TN	TX	UΤ	VT	VA	WA	wv_	WI	WY	PR
Full	Vame (Las	st name fii	rst, if individ	ual)									
Busin	ness or Re	sidence A	ddress (Num	ber and Stree	, City, State,	Zip Code							<del></del>
Nam	e of Assoc	iated Brol	ker or Dealer		· -			-					
State			•	licited or Inte								☐ All St	ates
A	<del>`                                    </del>	AK	AZ	AR	CA	сo	СТ	DE	DC	FL	GA	HI	ID
I	<del></del>	IN	lA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
M		NE	NV	NH	NJ	NM	NY	NC	ND	ОН	ОК	OR	PA
R	.1	SC	SD	TN	TX	UT	VT	VA	WA	W۷	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 the answer is "none" or "zero." If the transaction is an exchange offering, check this box  and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ <u>0.00</u>	\$0.00
	Equity	\$ Indefinite	\$ <u>32,756,000</u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$ <u>0.00</u>	<b>\$</b> 0.00
	Partnership Interests	\$ <u>0.00</u>	\$0.00
	Other (Specify)	\$ <u>0.00</u>	\$0.00
	Total	\$ Indefinite	\$ <u>32,756,000</u>
	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 Dollar Amount of Purchases
	Accredited Investors	111	\$ <u>32,756,000</u>
	Non-accredited Investors	<u>Q</u>	<b>\$</b> _0.00
	Total (for filings under Rule 504 only)		\$
	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 Security	Dollar Amount Sold
	Rule 505	<u>N/A</u>	\$N/A
	Regulation A	N/A	\$N/A
	Rule 504	N/A	\$N/A
	Total	N/A	\$ <u>N/A</u>
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 insurer. 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		\$N/A
	Printing and Engraving Costs	$\boxtimes$	\$ <u>10,000</u>
	Legal Fees	⊠	<b>\$130,000</b>
	Accounting Fees	⋈	<b>\$30,000</b>
	Engineering Fees		\$N/A
	Sales Commissions (specify finders' fees separately)		\$N/A
	Other Expenses (identify) Blue Sky Fees/Expenses (including fees of counsel), Offering Expenses, Miscellaneous Expenses		\$35,000
	Total	⊠	\$205,000

	b. Enter the difference between the Question 1 and total expenses fur difference is the "adjusted gross pro-	mished in response to Pa	rt C - Question 4.a.	This		\$_N/A_
5.	Indicate below the amount of the ac- used for each of the purposes shows estimate and check the box to the la equal the adjusted gross proceeds to above.	<ol> <li>If the amount for any put of of the estimate. The tot</li> </ol>	rpose is not known, fur al of the payments liste	nish an ed must		
					Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and focs	4-14-4-7	\$\$1.212.00.11.00.10.00.10.10.10.10.10.10.10.10.		□ \$_N/A	□ \$_N/A_
	Purchase of real estate	***************************************	*************************************	************	□ \$_N/A_	□ \$_N/A_
	Purchase, rental or leasing and instal	llation of machinery and eq	uipment	***************************************	OS_NA_	□ \$_N/A_
	Construction or leasing of plant buil	dings and facilities	***************************************	•••••••••••••••••••••••••••••••••••••••	□ \$_N/A_	□ \$_N/A_
	Acquisition of other businesses (ind may be used in exchange for the sea	luding the value of securities ets or securities of another i	es involved in this offici issuer pursuant to a men	ing that ger)	□\$_N/A_	□\$_\\A_
	Repayment of indebtedness		*******************************		- \$_N/A_	□ \$_N/A_
	Working capital	í	***************************************		□ \$_N/A_	□ \$_N/A_
	Other (specify):	•	<del></del>		□ \$_N/A_	□\$_ <u>N</u> /A_
		,				□\$\\\A
	Column Totals	1			□ \$ <u>0.00</u>	<b>\$_0.00</b>
	Total Payments Listed (column total	s addod)		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0.00
			1,5.			No. of Ye
following	r has duly caused this notice to be signature constitutes an undertaking nation furnished by the issuer to any n	by the issuer to the U.S. S	ocurities and Exchange	Commis	tion, upon written	nder Rule 505, the request of its staff,
issuer (Pr	int or Type)	Signaturo	h	Date		
Cadogan LLC	Opportunistic Alternatives Fund,	//W/ C	A	8	-1-0	<b>み</b>
Name of	Signer (Print or Type)	Title of Signer (Print or T	(уре)			
Matthew.	Jenal	Director and Treasurer				
	·					
•	Tatantianal - lectatement -	ATTENT	TION	latters ^	Page 1971 6 C 199	11.

1.	ls any party described in 17 provisions of such rule?	CFR 230.262 present	ly subject to an	of the disqualification	Yes No	
		See Appendix, C	Column 5, for state	response.		
2.	The undersigned issuer hereby Form D (17 CFR 239.500) at su			strator of any state in which	ch this notice is filed a notice o	XI.
3.	The undersigned issuer hereby issuer to offeroes.	undertakes to furnish t	o the state admini	strators, upon written requ	est, information famished by the	10
4.	The undersigned issuer representation (Ularited Offering Essemption (Ularites exemption has the burden	LOB) of the state in wh	ich this notice is f	iled and understands that the		
	r has read this notification and od duly authorized person.	knows the contents to	be true and has	duly caused this notice to	be signed on its behalf by the	×
Issuer (Pri	nt or Type)	Signature		Data	<del></del>	_
цс	Opportunistic Alternatives Fu	nd.		2 8-	1-07	
Name (Pri	nt or Type)	Title (Print or Ty	ps)	*		_
Matthew J	enal	Director and Tree	HELECT			

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of ever 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.

			<del>,</del>	API	PENDIX						
1	Intend to non-acconnection investigates	to sell to credited tors in Part B-m 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	1	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL		1				None			7		
AK		7				None			7		
AZ		7				None			<b>-</b>		
AR		~				None			<b>V</b>		
CA		<b>V</b>	Equity- Indefinite	3	\$230,000	None			V-		
СО		~	Equity- Indefinite	1	\$100,000	None					
CT		1				None			<b>-</b>		
DE		<b>V</b>	-	ı		None			7		
DC		1				None			<b>~</b>		
FL		7	Equity- Indefinite	29	\$13,696,000	None					
GA		7	Equity- Indefinite	41	\$9,035,000	None	· · · · · · · ·				
HI		<b>-</b>				None			<b>/</b>		
ID		<b>✓</b>				None			7		
IL	-	1		· · · · · · · · · · · · · · · · · · ·		None			<b>1</b>		
IN		<b>V</b>				None			~		
IA		1	:	,		None			~		
KS	İ	~				None			~		
KY	-		,			None					
LA		<b>V</b>				None					
ME					1	None					
MD			Equity- Indefinite	1	\$338,000	None	···				
MA		7				None					
MI		<b>~</b>				None			7		
MN		~	-			None			7		
MS		~				None	· , · · ·				
МО		<b>V</b>				None			~		
МТ		7				None			<b></b>		
NE		7				None			<b>1</b>		
NV		<b>-</b>				None			7		
NH		7		_		None			<b>1</b>		

				API	PENDIX					
1	Intend to non-according investigation	to sell to credited tors in Part B-m 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NJ		<b>/</b>	Equity- Indefinite	1	\$50,000	None			7	
NM	-	7				None			1	
NY		~	Equity- Indefinite	1	\$250,000	None			<b>~</b>	
NC		<b>*</b>	Equity- Indefinite	6	\$3,349,000	None			· /	
ND	_	<b>V</b>				None			7	
ОН		1				None			~	
ОК		1				None			7	
OR		<b>1</b>				None			<b>V</b>	
PA		<b>1</b>	_			None			<b>V</b>	
RI		<b>-</b>				None		1	~	
SC		<b>*</b>	Equity- Indefinite	2	\$691,000	None			<i>√</i>	
SD		<b>√</b>	Equity- Indefinite	1	\$241,000	None	<del>-</del>		7	
TN		<b>√</b>	Equity- Indefinite	6	\$1,348,000	None	,			
TX		<b>-</b>				None			<b>√</b>	
UT		_				None				
VT						None				
VA			Equity- Indefinite	12	\$3,118,000	None			<b>*</b>	
WA		<b>*</b>		,		None			· ·	
wv			Equity- Indefinite	7	\$310,000	None			· /	
WI		~				None			<b>/</b>	
WY						None			<b>V</b>	
PR		~				None			<b>*</b>	

