FORM D

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

1387114



FORM D

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

SEC USE ONLY					
Prefix	Serial				
	1 1				
	DATE RECEIVED				

CIVITORIA EIMITED OFFERING EXEMITION
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Private Placement of Limited Partnership Interests of Participating Shares of Brookline Avenue Offshore Fund, Ltd. RECEIVED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA A. BASIC IDENTIFICATION DATA
A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Brookline Avenue Offshore Fund, Ltd.
Address of Executive Offices (No. and Street, City, State, Zip Code) Telephone Number (Including Area Code)
c/o Brookline Avenue Partners, L.P., 100 Crescent Court, Suite 1100, Dallas, Texas 75201 (214) 775-3100
Address of Principal Business Operations (No. and Street, City, State, Zip Code) (if different from Executive Offices) Telephone Number (Including Area Code)
Brief Description of Business Investment Partnership
Type of Business Organization
corporation Imited partnership, already formed other (please specify): Cayman Islands exempted
business trust
Actual or Estimated Date of Incorporation or Organization: Month Year
Jurisdiction of Incorporation or Organization; (Enter two-letter U.S. Postal Service abbreviation for State: FN
CN for Canada; FN for other foreign jurisdiction)
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.

PROCESSED
AUG 2 4 2007

SEC 1972 (2-97)

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.

			A. BASIC IDEN	TIFICATION DATA		
2.	Enter the information r	equested for the fo	ollowing:			
x x x	Each beneficial owner issuer; Each executive officer	having the power and director of cor	rporate issuers and of corpo	t the vote or disposition of		e of a class of equity securities of the artnership issuers; and
<u>X</u>	Each general and mana					
Ch	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	⊠ Manager
	ll Name (Last name first, ookline Avenue Partner					
	siness or Residence Add O Crescent Court, Suite		Street, City, State, Zip Cod as 75201	e)		
_	eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	Member of the General Partner of the General Partner
Slo	ll Name (Last name first, otnik, Charles B.					
			Street, City, State, Zip Cod rescent Court, Suite 1100			
_	eck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	☐ Director	Member of the General Partner Partner
M	ll Name (Last name first, orano, Richard M., II	•				
			Street, City, State, Zip Cod			
_	eck Box(es) that Apply:	Promoter	rescent Court, Suite 1100 Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
	ll Name (Last name first, addick, Geoff	if individual)				ividiaging i desici
Bu	siness or Residence Add		Street, City, State, Zip Cod rescent Court, Suite 1100			
	eck Box(es) that Apply:		☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
	II Name (Last name first, eter, Lana	if individual)	•			
			Street, City, State, Zip Cod rescent Court, Suite 1100			
Ch	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Fu	Il Name (Last name first,	if individual)				
Bu	siness or Residence Add	ress (Number and	Street, City, State, Zip Cod	e)		
Ch	eck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Fu	Il Name (Last name first,	if individual)				
Bu	siness or Residence Add	ress (Number and	Street, City, State, Zip Cod	e)	<u></u>	

						B. IN	FORM	1ATIO	N ABC	UT O	FFERI	NG		
1. H	as the iss	uer sold			er intend so in Ap							ng?	Yes □	No ⊠
2. W	hat is the	e minim	um inves	stment ti	hat will l	ре ассер	ted fron	n any inc	dividual'	?			\$ <u>5,0</u>	000,000
3. D	oes the o	ffering p	ermit jo	int own	ership of	a single	unit:						Yes ⊠	No □
in of re (5	indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) 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.													
Full Na	Full Name (Last name first, if individual)													
Busine	Business or Residence Address (Number and Street, City, State, Zip Code)													
Name	of Assoc	iated Bre	oker or I	Dealer										
	n Which						o Solici	Purcha						A 11 Ct - 4
•	"All Sta						(DE)					(15)		All States
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[MT]	[NE]	[NV]	[NH]	[א]]	[NM]	[NY]	[NC]	[ND]	[MI] [OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	(TN)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Na	ıme (Las	t name f	irst, if in	ıdividua	l)									
Busine	ss or Res	idence /	Address	(Numbe	r and St	reet, City	y, State,	Zip Coo	le)					
Name o	of Assoc	iated Br	oker or I	Dealer										
	n Which													All States
(Check	[AK]	(AZ)	(AR)	uividuai [CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	(HI)	[ID]		All States
[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]	נעד)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)		
Full Na	ıme (Las	t name f	irst, if in	ndividua	1)									
Busine	ss or Res	sidence A	Address	(Numbe	r and St	reet, Cit	y, State,	Zip Cox	ie)					
Name	of Assoc	iated Bro	oker or I	Dealer		•								
	n Which													
(Check	"All Sta	ites" or o	eneck inc	dividual	States).	•••••	•••••		••••••				Ц	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]	[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 the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security	C	Aggreg Offering		Am	ount Already Sold
	Debt	\$	0		\$	0
	Equity	\$_	0		\$	0
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$.	0		S	0
	Partnership Interests	\$	0		s	0
	Other (Specify Participating Shares)	\$12	3,069,9	35.32	\$123	3,069,935.32
	Total		3,069,9			3,069,935.32
	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 the answer is "none" or "zero."		¥1\$			A
			Numb Invest		Do	Aggregate ollar Amount f Purchases
	Accredited Investors		26		\$ <u>123</u>	3,069,935.32
	Non-accredited Investors		0_		s	0
	Total (for filings under Rule 504 only)		N/A		\$	N/A
3.	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.					
	Type of offering		Type		Do	ollar Amount
	D 1 606		Securi	ity	•	Sold
	Rule 505	_	N/A		?	N/A
	Regulation A		N/A		\$	N/A
	Rule 504	_	N/A		ž—	N/A
	Total		N/A		7	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the secuthis offering. Exclude amounts relating solely to organization expenses of the issuer. The informable given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.	ation :				
	Transfer Agent's Fees				\$	0
	Printing and Engraving Costs				\$. 0
	Legal Fees			Ø	s	92,400
	Accounting Fees				\$	0
	Engineering Fees				\$	0
	Sales Commissions (specify finder's fees separately)			_	\$	0
	Other Expenses (identify)				<u> </u>	0
	Total			×	\$	92,400
				_	~	

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES A	AND USE	OF PF	ROCEED	S
	and total expenses furnished in response t	gate offering price given in response to Part C-Que o Part C-Question 4.a. This difference is the "adjus	sted gross			\$ <u>122,977,535,32</u>
5.	each of the purposes shown. If the amoun	gross proceeds to the issuer used or proposed to be it for any purpose is not known, furnish an estimate The total of the payments listed must equal the adju to Part C-Question 4.b. above.	and			
				O Dire	ments to fficers, ectors, & filiates	Payments To Others
	Salaries and fees			S	0	s
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and insta	s		s		
	Construction or leasing of plant bui	\$□		s		
	Acquisition of other businesses (inc may be used in exchange for the ass	luding the value of securities involved in this offeriets or securities of another issuer pursuant to a mer	ing that ger)□	s		s
	Repayment of indebtedness			\$ \$		s
	Working capital					
	Other (specify) (investments)			\$	⊠	\$ 122,977,535.3
	Column Totals			s	⊠	\$ <u>122,977,535.3</u>
	Total Payments Listed (column total	ls added)			\$ <u>122,</u>	977,535.32
	**************************************	D. FEDERAL SIGNATURE				
signa	ture constitutes an undertaking by the issue	ed by the undersigned duly authorized person. If the r to furnish to the U.S. Securities and Exchange Coccedited investor pursuant to paragraph (b) (2) of the content of t	mmission,			
Iss	uer (Print or Type)	Signature	Date			
Bre	okline Avenue Offshore Fund, Ltd.	Bill mm D	August	4, 2007		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		-		
Ric	hard M. Morano, II	Director and Member of the General Partner of	the Manage	er of the	Issuer	
		ATTENTION				
	Intentional misstatements or o	missions of fact constitute federal criminal	violation	(500	18 H S C	4004)

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		E. STATE SIGNATURE						
1.		presently subject to any of the disqualification prov		Yes	No ⊠			
	See Appendi	ix, Column 5, for state response.						
2.	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.							
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.		ssuer is familiar with the conditions that must be s which this notice is filed and understands that the at these conditions have been satisfied.						
	e issuer has read this notification and knows the lersigned duly authorized person.	the contents to be true and has duly caused this no	tice to be signed on its	s behalf by the	:			
İssi	uer (Print or Type)	Signature	Date					
Bro	Brookline Avenue Offshore Fund, Ltd. August 42007							
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)						
Ric	hard M. Morano, II	Director and Member of the General Partner of	the Manager of the Iss	Suer				

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	· · · ·	5					
	non-acc investor (Par	to sell to credited s in State rt B- n 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount					
AL						Investors	Amount			
AK										
AZ		ļ								
AR	İ									
CA		Х	\$106,422,455	19	\$106,422,455	0	\$0	No		
со										
CT										
DE			i							
DC										
FL		Х	\$500,000	1	\$500,000	0	\$0	No		
GA										
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LA										
ME										
MD										
MA										
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APPENDIX

1		2 3 4						5		
	non-ac investor (Pa	to sell to credited s in State rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
MT										
NE					· · · · · · · · · · · · · · · · · · ·					
NV										
NH	1									
NJ			·							
NM										
NY		Х	\$1,647,480.32	2	\$1,647,480.32	0	\$0	No		
NC										
ND										
ОН										
ОК										
OR							·			
PA				<u> </u>						
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