FORM D

PROCESSED

JAN 25 2008

IMOMSON
FINANCIAL

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

FORM D

OMB APPROVAL

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

Name of Offering (check if this is a Alupka Absolute Return Fund, L.P.	an amendment and name has changed, and indicate	icate change.)
Filing Under (Check box(es) that app	ly): Rule 504 Rule 505	Rule 506 Section 4(6) ULOE
Type of Filing: ☐ New Filing ☒ A	mendment	
	A. BASIC IDENTIFICATION	ON DATA
1. Enter the information requested ab	out the issuer	A KARIII DOJAH KARII BODAH KARII BUTAH KIRIB JUTAH KIRIB JUTAH KIRIB JUTAH KIRIB JUTAH KIRIB JUTAH KIRIB JUTAH
Name of Issuer (check if this is an Alupka Absolute Return Fund, L.P.	amendment and name has changed, and indicat	te change.)
44 Montgomery Street, Suite 1280, S		Telephone 08022224 (415) 956-9175
Address of Principal Business Operat (if different from Executive Offices)	ions (Number and Street, City, State, Zip Cod	Aa a
Brief Description of Business Investment Limited Partnership		JAN -
Type of Business Organization		1, 7200
□ corporation	☑ limited partnership, already formed	other (please specify):
□ business trust	☐ limited partnership, to be formed	other (please specify): Washington, Do
Actual or Estimated Date of Incorporation of Incorporation or Organ		Month Year 1 1 0 0
GENERAL INSTRUCTIONS		
Federal:	and the second s	D. 14 D. 9 4 460 15 055 000 00

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 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 in 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. Con-versely, 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.

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; 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 Managing Partner							
Full Name (Last name first, if individual) Alupka Asset Management, L.L.C.								
Business or Residence Address (Number and Street, City, State, Zip Code) 44 Montgomery Street, Suite 1280, San Francisco, CA 94104								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner							
Full Name (Last name first, if individual) Besobrasov, Nicholas C.								
Business or Residence Address (Number and Street, City, State, Zip Code) 44 Montgomery Street, Suite 1280, San Francisco, CA 94104								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	☐ General and/or Managing Partner							
Full Name (Last name first, if individual) Nelson, Christopher J.								
Business or Residence Address (Number and Street, City, State, Zip Code) 44 Montgomery Street, Suite 1280, San Francisco, CA 94104								
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 (Number and Street, City, State, Zip Code)								
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 (Number and Street, City, State, Zip Code)								
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 (Number and Street, City, State, Zip Code)								
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 (Number and Street, City, State, Zip Code)								

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

B. INFORMATION ABOUT OFFERING															
															-
														Yes	No
1. Has	the issu	er sold,	or does	the issu	er inten	d to sell	, to non	-accred	ited inve	stors in	this off	ering?		\boxtimes	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.															
										_	inder O	LOL.		_	
2. What is the minimum investment that will be accepted from any individual?								\$ <u></u> :	500,000						
								Yes	No						
3. Does	s the off	ering pe	rmit joi	nt owne	ership of	`a singl	e unit?							\boxtimes	Ш
4. Enter the information requested for each person who has been or will be paid or given, directly or 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	ame (La	st name	first, if	individ	ual)										
Busine	ss or Re	sidence	Addres	s (Num	ber and	Street,	City, Sta	ite, Zip	Code)						
Name	of Assoc	ciated B	roker o	Dealer											
States	in Whic	h Persor	ı Listed	Has So	licited o	r Intend	s to So	licit Pur	chasers						
(Chec	k "All	States	" or ch		dividu		es)							All State	s
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL] [MT]	(IN)	[IA] [NV]	(KS)	[KY] [NJ]	[LA] [NM]	[ME]	[MD]	[MA] [DN]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]			
[RI]	(SC)	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full Na	ame (La	st name	first, if	individ	ual)										-
		• •	4 1 1	0.1	. ,	G	G: G:	7	0.40						
Busine	ss or Re	sidence	Addres	s (Num	ber and	Street,	City, Sta	ite, Zip	Code						
Name	of Asso	ciated B	roker o	Dealer											
States	in Whic	h Persor	n Listed	Has So	licited o	r Intend	is to So	licit Pur	chasers						
(Chec	k "All	States	" or ch	eck in	dividu	al Stat	es)						🔲 🗸	All State	s
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]		[FL]			[ID]			
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[IM]	[MM]	[MS]	[MO]			
[MT]	[NE] [SC]	(NV) [SD]	[NH] [TN]	[NJ] [TX]	(NM) [UT]	(YY) [TV]	[NC] [VA]	[MD] [AW]	[OH] [WV]	[OK]	[OR] [WY]	[PA] [PR]			
		st name				[-+]	[112]			[=]	3	12.11			
Business or Residence Address (Number and Street, City, State, Zip Code)															
Name of Associated Broker or Dealer															
States	in Whic	h Persoi	n Listed	Has So	licited o	r Intend	ls to So	licit Pur	chasers						
(Check "All States" or check individual States)									S						
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL]	[IN]	[IA]	(KS)	[KY]	[LA]	(ME)	[MD]	[MA]	[MI]	[OK] [WN]	[MS]	[MO] [PA]			
(MT) [RI]	(NE) (SC)	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[YY] [YT]	[NC] [VA]	(DN) [WA]	[OH]	[OK]	[OR] [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 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate	Amount Already
Type of Security	Offering Price	Sold
	•	
Debt		\$
Equity	\$	\$
Common Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$ <u>100,000,000</u>	\$ <u>16,375,500</u>
Other (Specify)	\$	\$
Total		\$16,375,500
Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	
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	35	\$ <u>16,375,500</u>
Non-accredited Investors		\$
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, 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	Dollar Amount
	Security	Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
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	⊠	\$500
Legal Fees	⊠	\$ 10,000
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		s
Other Expenses (identify) Blue sky expenses	⊠	\$ 2,000
Total	⊠	\$ 12 500

b. Enter the difference between the aggregate offering pri Question I and total expenses furnished in response to Par is the "adjusted gross proceeds to the issuer."		\$ <u>99,987,500</u>					
5. Indicate below the amount of the adjusted gross proceeds to used for each of the purposes shown. If the amount for an estimate and check the box to the left of the estimate must equal the adjusted gross proceeds to the issuer set for tion 4.b above.	o the issuer used or proposed to buny purpose is not known, furnis. The total of the payments liste	e h d					
			Payments to Officers, Directors, & Affiliates				
Salaries and fees] \$_	□	\$			
Purchase of real estate] \$ _	🗆	\$			
Purchase, rental or leasing and installation of machine	ry and equipment] \$_		\$			
Construction or leasing of plant buildings and facilitie	s [] \$_	□	\$			
Acquisition of other businesses (including the value of	f securities involved in this						
offering that may be used in exchange for the assets of	r securities of another issuer						
pursuant to a merger)] \$_		\$			
Repayment of indebtedness	C] \$_	□	\$			
Working capital] \$_	□	\$			
Other (specify): <u>Invest, reinvest and trade in securities</u>	<u> </u>] \$_		\$ <u>99,987,500</u>			
] \$_	□	\$			
Column Totais] \$_	0 🛭	\$ <u>99,987,500</u>			
Total Payments Listed (column totals added)	⊠ \$	<u>99,987,500</u>					
D. FEDERAL SIGNATURE							
The issuer has duly caused this notice to be signed by the unc following signature constitutes an undertaking by the issuer request of its staff, the information furnished by the issuer to a	to furnish to the U.S. Securities a	and E	Exchange Comn	nission, upon written			
Issuer (Print or Type)	Signature	-	Da	te			
Alupka Absolute Return Fund, L.P.		12	2.9.07				
Name of Signer (Print or Type) Title of Signer (Print or Type) Managing Member of Alupka Asset Management, L.L.C., its General Partner.							
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Intentional misstatements or omissions of fact	ATTENTION constitute federal criminal v	iola	tions. (See 1	8 U.S.C. 1001.)			

