## FORM D

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

# FORM D

OMB APPROVAL						
OMB NUMBER:	3235-0076					
Expires:	April 30, 2008					
Estimated aver	age burden					
hours per respo	nse 16.00					



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

SEC USE ONLY				
Prefix		Serial		
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### GENERAL INSTRUCTIONS Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under R3 hazabase or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

## THOMSOM

When To File: A notice must be filed no later than 15 days after the first sale of securite MANGIAING. 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 need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering exemption (ULOE) for sales of securities in those state 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.

<ul> <li>Each beneficial owner having the po- securities of the issuer;</li> </ul>	wer to vote or dispose, or di	rect the vote or dispositi	on of, 10% or n	nore of a class of equity
<ul> <li>Each executive officer and director of issuers; and</li> </ul>	f corporate issuers and of co	orporate general and mar	naging general p	partners of partnership
<ul> <li>Each general and managing partner of</li> </ul>				
Check Box(es)that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name first, if individual) EnTrust Partners, LLC (the "General Pa	rtner")			
Business or Residence Address (Number 717 Fifth Avenue, New York, NY 10022	and Street, City, State, Zip C	Code)		- · · · · · · · · · · · · · · · · · · ·
Check Box(es)that Apply:  Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name first, if individual) Horowitz, Michael E.			-	
Business or Residence Address (Number 717 Fifth Avenue, New York, NY 10022	and Street, City, State, Zip C	Code)		
Check Box(es)that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name first, if individual) Fife, Mark S.			• • •	
Business or Residence Address (Number 717 Fifth Avenue, New York, NY 10022	and Street, City, State, Zip C	Code)		
Check Box(es)that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name first, if individual)  Hymowitz, Gregg S.				
Business or Residence Address (Number 717 Fifth Avenue, New York, NY 10022	and Street, City, State, Zip (	Code)		
Check Box(es)that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
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 Partners
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 Partners
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 neces	ssary.).	.,,,-	

A. BASIC IDENTIFICATION DATA

Each promoter of the issuer, if the issuer has been organized within the past five years;

2. Enter the information requested for the following:

<u> </u>				В.	INFORMA	TION ABOU	T OFFERI	NG				
1. Ung the	icenor cale	d or door t	ha issues in						~?		Yes	
1. Has the issuer sold, or does the issuer intend to send, to non-accredited investors in this offering?								X				
Answer also in Appendix, Column 2, it thing under Obot.							\$1.0	100 000*				
2. What is the minimum investment that will be accepted from any individual?\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\								700,000				
*Subject to the reduction at the discretion of the General Partner.						Yes	No					
3. Does the offering permit joint ownership of a single unit?												
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 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 person of such a broker or dealer, you may set forth the information for that broker or dealer only. NOT APPLICABLE. Full Name (Last name first, if individual)												
Business	or Residen	ce Address	(Number	r and Stree	t, City, Stat	e, Zip Cod	e)		<u> </u>			
Name of	Associated	Broker or	Dealer		· · · · · · · · · · · · · · · · · · ·					··· - ···	•	
	Which Pers "All States										X	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]	[N]]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nan	ne first, if i	ndividual)									
Business	or Residen	ce Address	(Number	and Street	, City, Stat	e, Zip Cod	e)					
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)							4 11 G4 - 4					
•												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] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	e (Last nam			נאן	[01]	[41]	البا	[ nv]	[ ** * ]	[141]	[#1]	[1 13]
Business or Residence Address (Number and Street, City, State, Zip Code)												
States in Which Person Listed has Solicited or Intends to Solicit Purchasers (Check "All States" or check 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]	[WA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEEDS	
1. Enter the aggregate offing 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 Debt	Aggregate Offering Amount \$ 0	Amount Already Sold \$ 0
Equity		\$ <u>0</u>
	<u> </u>	\$ <u>0</u>
Convertible Securities (including warrants)	\$ <u>0</u>	
Partnership Interests	\$5,000,000,000	\$ <u>338,796,537</u>
Other (Specify)		\$ 0
Total		\$ 338,796,537
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	Aggregate Dollar Amount
Accredited Investors	Investors 102	of Purchases \$ 338,796,537
Non-accredited Investors	0	\$ <u>0</u>
	v	
	N/A	\$ N/A
Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>
Total (for filings under Rule 504 only)		
Total (for filings under Rule 504 only)	Type of	Dollar Amount
Total (for filings under Rule 504 only)	Type of Security	Dollar Amount Sold
Total (for filings under Rule 504 only)	Type of Security N/A	Dollar Amount Sold \$ <u>0</u>
Total (for filings under Rule 504 only)	Type of Security N/A N/A	Dollar Amount Sold \$ <u>0</u>
Total (for filings under Rule 504 only)	Type of Security N/A	Dollar Amount Sold \$ <u>0</u>
Total (for filings under Rule 504 only)	Type of Security N/A N/A N/A	Dollar Amount
Total (for filings under Rule 504 only)	Type of Security N/A N/A N/A	Dollar Amount
Total (for filings under Rule 504 only)	Type of Security N/A N/A N/A	Dollar Amount
Total (for filings under Rule 504 only)	Type of Security N/A N/A N/A N/A	Dollar Amount
Total (for filings under Rule 504 only)	Type of Security N/A N/A N/A N/A	Dollar Amount
Total (for filings under Rule 504 only)	Type of Security N/A N/A N/A N/A  N/A	Dollar Amount
Total (for filings under Rule 504 only)	Type of Security N/A N/A N/A N/A  O  O  O  O  O  O  O  O  O  O  O  O  O	Dollar Amount Sold \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0
Total (for filings under Rule 504 only)	Type of Security N/A N/A N/A N/A N/A	Dollar Amount Sold \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 50,000 \$ 50,000 \$ 50 \$ 50 \$ 50 \$ 50 \$ 50 \$ 50 \$ 50 \$

Question & and the total expenses furnished in response to Part C the "adjusted gross proceeds to the issuer"	- Question 4.a. this differe	nce i	s		<b>\$</b> _	4,999,946,000
Indicate below the amount of the adjusted gross proceeds to the is for each of the purposes shown. If the amount for any purpose is and check the box to the left of the estimate. The total of the adjusted gross proceeds to the issuer set froth in response to Part 6	is not known, furnish an est payments listed must equ	timat	e			
			Payments Officers Directors, Affiliate	&		Payments To Others
Salaries and fees			\$ <u>0</u>			\$ <u>0</u>
Purchase of real estate	***************************************		\$ <u>0</u>			\$ 0
Purchase, rental or leasing and installation of machinery and	equipment		\$ <u>0</u>			\$ 0
Construction or leasing of plant buildings and facilities			\$ <u>0</u>			\$ <u>0</u>
Acquisition of other businesses (including the value of securior offering that may be used in exchange for the assets or securior issuer pursuant to a merger)	ties of another		\$ <u>0</u>			\$ <u>0</u>
Repayment on indebtedness			\$ <u>0</u>			\$ <u>0</u>
Working capital			\$ <u>0</u>			\$ <u>0</u>
Other (specify): Investments in securities.			\$ <u>0</u>		X	\$ <u>4,999,946,000</u>
Column Totals  Total Payments Listed (column totals added)			\$ <u>0</u>	\$ <u>4,</u>	⊠ 999,9	\$ <u>4,999,946,000</u> 946,000
D. FEDER	AL SIGNATURE					· · · · · · · · · · · · · · · · · · ·
The issuer has duly caused this notice to be signed by the undersical collowing signature constitutes an undertaking by the issuer to furnished by the issuer to any non-accredited investors.	ish to the U.S. Securities C	Comr	nission, upo	n writ	ten re	der Rule 505, the equest of its staff,
Issuer (Print or Type)  EnTrust Diversified Select Equity Fund L.P.	Signerary	1		Date	e 	123/18
Name of Signer (Print or Type)  By: EnTrust Partners, LLC, General Partner  By: Mark S. Fife	Title of Signer (Print or Principal	ype)		•		
A Intentional misstatements or omissions of fact cor	TTENTION	al v	iolations.	(See	÷ 18	U.S.C. 1001.)

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

