PROCESSED

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

1324275

FORM D

JUN 302008 🔀

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

SEC USE ONLY Prefix Serial DATE RECEIVED							
SEC USE ONLY							
Prefix			Serial				
	1	1					
	DATE RE	CEIVED					

OMB APPROVAL OMB Number:......3235-0076

Expires:June 30, 2008

Name of Offering	(☐ check if this is an ar	mendment and name	has changed, and in	dicate change.)	
Offering of limited (partnership interests of I	K2 Master Fund, L.P	·		
Filing Under (Check	box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	Section 4(6) ULOE VIGIT Processing
Type of Filing:	■ New Filing	Amendment			Section Section
		A. BASI	C IDENTIFICAT	ION DATA	
Enter the inform	nation requested about the	issuer			ын 2 6 2008
Name of Issuer	check if this is an an	nendment and name	has changed, and in	dicate change.	Machineton DO
K2 Master Fund, L.	Р.				Washington, DC
Address of Executive	Offices:		(Number and Stree	t, City, State, Zip Co	ode) Telephone Number (Including Area Code)
c/o K2 Advisors, L.	L.C., 300 Atlantic Street,	12 th Floor, Stamford	d, Connecticut 0690	1	(203)905.5358
Address of Principal	Offices		(Number and Stree	t, City, State, Zip Co	ode) Telephone Number (Including Area Code)
(if different from Exe	cutive Offices)				
Brief Description of E	Business: Private Inv	estment Company			
Type of Business Or	ganization				
	corporation	Ilimited	partnership, already	formed	other (please specify)
	☐ business trust	☐ limited	partnership, to be for	med	
			Month	Yea	<u>r</u>
Actual or Estimated	Date of Incorporation or O	rganization:	1 2	9	9 🛮 Actual 🔲 Estimated
Jurisdiction of Incorp	oration or Organization: (Enter two-letter U.S.	Postal Service Abbre	eviation for State;	
		C	N for Canada: FN fo	r other foreign jurisd	iction) D E

GENERAL INSTRUCTIONS Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 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 no Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below 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.



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or 15

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.

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.

> 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 ID	ENTIFICATION DATA		
Each beneficial owr Each executive office	ne issuer, if the issu ner having the pow cer and director of c	uer has been organized with er to vote or dispose, or din	hin the past five years; rect the vote or disposition of, orporate general and managin	, 10% or more of a	a class of equity securities of the issuer; tnership issuers; and
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual): K2 A	dvisors, L.L.C.			
Business or Residence Adda	ress (Number and	Street, City, State, Zip Code	e): 300 Atlantic Street, 12 th	^h Floor, Stamford	d, Connecticut 06901
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual): Doug	Jass III, William A.			
Business or Residence Addi	•	•	e): c/o K2 Advisors, L.L.C.	-	
Check Box(es) that Apply:	Promoter	Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, i	······································				
	····-				
Business or Residence Adda	•	•	e): c/o K2 Advisors, L.L.C.		
300 Atlantic Street, 12 th Flo Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual): Ferg	uson, John T.			
Business or Residence Add	*		e): c/o K2 Advisors, L.L.C.		
300 Atlantic Street, 12th Flo					
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual): K2 In	vestment Partners II, L.L.	.c.		
			e): c/o K2 Advisors, L.L.C.		
300 Atlantic Street, 12th Flo Check Box(es) that Apply:	oor, Stamford, Con Promoter	nnecticut 06901 Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Olion Doxioo, that ripely.		Z benenote owner			D grander allege, managing , amin
Full Name (Last name first, i	f individual): K2/H i	ighland Overseas, Ltd.			
Business or Residence Addr	•		e): c/o K2 Advisors, L.L.C.		
300 Atlantic Street, 12th Flo					
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual): K2 O	verseas investors i, Ltd.			
			e): c/o K2 Advisors, L.L.C.		
300 Atlantic Street, 12th Flo			7	——————————————————————————————————————	
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual): LK2 I	Fund, LLC			
	•	-	e): c/o K2 Advisors, L.L.C.		
300 Atlantic Street, 12th Flo					
Check Box(es) that Apply:	□ Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner

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

					В.	INFORM	MATION	ABOUT	OFFER	ING			
1. H	as the issue	er sold, or e	does the is	suer inten	d to sell, to	non-accr also in App	edited inve	estors in th lumn 2, if t	is offering iling under	? ULOE.		☐ Yes	⊠ No
2. V	What is the minimum investment that will be accepted from any individual?									\$1,000,000* May be waived by the General Partner			
3. [oes the offe	ring permi	t joint own	ership of a	single uni	t?						⊠ Yes	. □ No
a C a										s in the SEC d are			
Full N	ame (Last na	ame first, if	individual)									
Busine	ss or Resid	ence Addr	ess (Numb	per and Str	eet, City,	State, Zip	Code)						
Name	of Associate	d Broker o	or Dealer										
_ (Check "All S	tates" or cl	heck indivi	dual State	s)							C (10)	☐ All States
	_ ` `									•			
	. —												
Full N	ame (Last na	ıme first, if	individual)				<u> </u>	<u> </u>				
Busine	ss or Resid	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Name	of Associate	d Broker o	or Dealer					<u>-</u>					
													☐ All States
`					•						□ [HI]	☐ (ID)	
	□ [IN]	□ [IA]	☐ [KS]	□ [KY]	☐ [LA]	☐ [ME]	[MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
☐ [M] [NE]	□ [NV]											
☐ [RI	□ [SC]	☐ [SD]	□ [TN]	□ [TX]	[TU]	□ [VT]	□ [VA]	□ [WA]	□ [WV]	[WI]	[WY]	□ [PR]	
Full Na	ıme (Last na	ıme first, if	individual)									
Answer also in Appendix, Column 2, if filing under ULCE. 2. What is the minimum investment that will be accepted from any individual?													
Name	of Associate	d Broker o	or Dealer		11 20.11		_						
	_			_									☐ All States
: :					•				☐ [FL]	☐ [GA]	□ [HI]	[D]	_
	□ [IN]	[IA]	☐ [KS]	□ [KY]	☐ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
☐ [M ⁻] [NE]	□ [NV]	□ [NH]	[NJ]	□ [NM]	□ [NY]	☐ [NC]	☐ [ND]				□ [PA]	
□ [RI]	□ [SC]	□ (SD)	[TN]	□ [TX]	[TU]	[IV]	□ [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 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	\$	0	\$	0
	Equity	\$	0	\$	0_
	☐ Common				
	Convertible Securities (including warrants)	<u>\$</u>	0	\$	
	Partnership Interests	\$	3,000,000,000	\$	1,501,219,497
	Other (Specify)	\$	0	\$	
	Total	\$	3,000,000,000	\$	1,501,219,497
	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		7	\$	1,501,219,497
	Non-accredited Investors		n/a	\$	n/a
	Total (for filings under Rule 504 only)		0	<u>\$</u>	0
	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		Types of Security		Dollar Amount Sold
	Rule 505		n/a	\$	n/a
	Regulation A		n/a	\$	n/a
	Rule 504		n/a	\$	n/a
	Total		n/a	\$	n/a
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		🛛	\$	15,738
	Accounting Fees			\$	
	Engineering Fees		🗆	<u>\$</u>	
	Sales Commissions (specify finders' fees separately)	•••••	🗆	\$	
	Other Expenses (identify)		🗆	\$	
	Total		🛛	\$	15,738

4	b.Enter the difference between the aggregate offering price given in response to Part C–Quand total expenses furnished in response to Part C–Question 4.a. This difference is the "acgress proceeds to the Issuer."				<u>\$</u>	299,9	984,262
5	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to used for each of the purposes shown. If the amount for any purpose is not known, furnish a estimate and check the box to the left of the estimate. The total of the payments listed must the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b. ab	ari st equal					
	initial adjusted g. 035 processes to the research		Óf Dire	nents to ficers, ectors & filiates		•	nents to
			\$	0		\$	0
	Salaries and fees	-	•	0		<u>. </u>	0
	Purchase of real estate		*			<u>· </u>	0
	Purchase, rental or leasing and installation of machinery and equipment		3	0		<u>*</u>	0
	Construction or leasing of plant buildings and facilities		<u>\$</u>	0		<u>* </u>	
	pursuant to a merger		\$	0		\$	0
	Repayment of indebtedness		<u>\$</u>	0		<u>\$</u>	0_
	Working capital		\$	0	\boxtimes	\$299 <u>,</u>	984 <u>,262</u>
	Other (specify):		\$	0		\$	0_
			\$	0		<u>\$</u>	0_
	Column Totals		<u>\$</u>	0	☒	\$ 299,	984,262
	Total payments Listed (column totals added)			★ 2	99,9	84,262	<u>-</u>
_	D. FEDERAL SIGNATUR						
CC	nis issuer has duly caused this notice to be signed by the undersigned duly authorized person postitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comm to the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	n. If this ission, u	notice is file pon written r	d under Ruie (equest of its s	505, the taff, the	e following s e informatio	signature n furnished
	suer (Print or Type) Signature Signature			Da	te		
	2 Master Fund, L.P.			Ju	ine 2	25, 2008	3
	ame of Signer (Print or Type) Title of Signer (Print of Type) The Type of Signer (Print of Type) The Type of Signer (Print of Type) Title of Signer (Print of Type)	dvisors,	L.L.C., its G	eneral Partn	er _		
			•				
							•
	ATTENTION						
-	Intentional misstatements or omissions of fact constitute federal of	riminal	violations. (See 18 U.S.C	. 1001.)	

E. STATE SIGNATURE

Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?

See Appendix, Column 5, for state response.

- 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.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 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.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Leaves (Dilat as Truck)		Date
Issuer (Print or Type)	Signature	
K2 Master Fund, L.P.	9100	June 25, 2008
Name of Signer (Print or Type)	Title of Signer (Phint or Type)	
John T. Ferguson	Offief Operating Officer, K2 Advisors, L.I	L.C., its General Partner
-	1//	

Instruction:

Print the names 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 not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX				
1	2	2	3			4		5	5
	Intend to non-ad investors (Part B -	ccredited	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	Limited Partnership Interests	Number of Accredited Investors	Amount .	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK	•								
AZ	-								
AR									
ÇA									
со									
СТ		Х	\$3,000,000,000	3	\$386,581,075	0	\$0		х
DE									
DC									<u> </u>
FL									<u> </u>
GA								<u> </u>	-
НІ									-
ID									
IL				<u> </u>					
IN									
IA								<u> </u>	<u> </u>
KS									
KY									
LA				· · · · · · · · · · · · · · · · · · ·		-	<u></u>	<u> </u>	-
ME							.	<u> </u>	
MD									<u> </u>
MA									
MI									-
MN MS							·	-	
MO							·		
MT									-
NE									
NV									
NH								-	
NJ			-	, <u>.</u>					-
NM							<u> </u>		-
					<u> </u>	<u> </u>			

		<u></u>		AP	PENDIX					
1	1 2 3 4							5		
	to non-a	to sell ccredited s in State - Item 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	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NY										
NC										
ND										
ОН										
ок										
OR										
PA										
RI										
sc										
SD										
TN										
TX										
UT										
VT									ļ	
VA										
WA								ļ	<u> </u>	
wv						ļ			<u> </u>	
WI										
WY										
Non us		х	\$3,000,000,000	4	\$1,114,638,42	0	\$0		X	

