

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

143	9378
OMB APPR	OVAL
OMB Number:	3235-0076
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hours per respon	se16.00

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Filling Under (Check how/es) that applied. [7] Bull 604 [7] Bull 605 [7] Bull 606 [7]) (7) 18 05
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment)
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.) Stark Criterion Fund Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3600 South Lake Drive, St. Francis, WI 53235-3716 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 in securities.	I
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	please specify): international business corp.
Month Year	PROCESSED
Actual or Estimated Date of Incorporation or Organization: 016 016 K Actual Esti Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Stat CN for Canada; FN for other foreign jurisdiction)	∷ JUL 0 9 2008 🖔
GENERAL INSTRUCTIONS	THOMSON REUIS
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 17d(6).	
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given the security of the secu	 A notice is deemed filed with the U.S. Securities 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.	
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. 20	0549.
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 26 Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual	ly sign
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 26 Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual 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 reposition, the information requested in Part C, and any material changes from the information previously supp	ly sign
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 26 Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual 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 repetitive the information requested in Part C, and any material changes from the information previously support be filed with the SEC.	ort the lied in 08054279 sales of securities in those states that have adopted Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall

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.

filing of a federal notice.

,		A. BASIC	IDENTIFICATION DATA		•
2. Enter the information re	equested for the fo	llowing:			
Each promoter of	the issuer, if the is	suer has been organized	d within the past five years;		
Each beneficial ow	ener having the pov	ver to vote or dispose, or	direct the vote or disposition	n of, 10% or more of	a class of equity securities of the issue
• Each executive of	ficer and director o	of corporate issuers and	of corporate general and ma	anaging partners of	partnership issuers; and
Each general and i	managing partner o	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Own	er Executive Officer	Director	K General and/or Investment Manager
Full Name (Last name first, Stark Criterion Manage	•		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre 3600 South Lake Drive			Code)		
Check Box(es) that Apply:	Promoter	Beneficial Own	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Stark, Brian J.	if individual)				
Business or Residence Addre 3600 South Lake Drive	•	•	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Roth, Michael A.	f individual)			· · · · · · · · · · · · · · · · · · ·	
Business or Residence Addre 3600 South Lake Drive			Code)	· <u>-</u> -	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (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, i	f individual)			· · · · · · · · · · · · · · · · · · ·	
Business or Residence Addre	ss (Number and	Street, City, State, Zip	Code)		
	(Use bla	nk sheet or conv and u	se additional copies of this	sheet, as necessary)	

	,				В. І	NFORMAT	ION ABOU	T OFFERI	NG				
	Hac the	issuer sol	d or does t	he icener i	ntend to ce	ell to non a	occredited i	nvectore is	this offer	ina?		Yes	No E
١.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									u	×		
2.										\$ 5,00	000,00		
										Yes	No		
3.			permit join									K	
4.	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.												
	l Name (√one	Last name	first, if ind	ividual)								-	
Bus	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	Zip Code)					,	
Nar	ne of Ass	sociated Br	roker or De	aler					_				
51-1	!- WI	: - L D	1:0-411	S-11-14-4	. 1		D 1						
Stai			Listed Has s" or check										l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full	Name (Last name	first, if indi	ividual)									
Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)					_ -	
Nan	ne of Ass	sociated Br	oker or Dea	aler					<u> </u>				
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		- -				
	(Check	"All States	or check	individual	States)	************		************	*************	*************	**********	☐ AI	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full	Name (I	Last name	first, if indi	vidual)		<u> </u>			-				
Bus	iness or	Residence	Address (N	lumber an	d Street, C	ity, State,	Zip Code)				<u> </u>		

Nan	ne of Ass	sociated Br	oker or Dea	aler									
Stat			Listed Has										 -
	(Check	"All States	or check	individual	States)	***************************************		************	***********	****/*********		☐ AI	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA 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 Aircady Sold
	Debt	S	_ s
	Equity		\$ 75,000,000
	☑ Common ☐ Preferred	-	
	Convertible Securities (including warrants)	S	_ s
	Partnership Interests	5	
	Other (Specify)		
	Total		
	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	2	\$ 75,000,000
	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, 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		\$
	Regulation A		s
	Rule 504		\$
	Total		S
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] \$
	Printing and Engraving Costs] S
	Legal Fees	Г] \$
	Accounting Fees		
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)	_	
	Other Expenses (identify)	_	_
	Total	_	

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	·		\$_unlimited
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[S
	Purchase of real estate	[s	\$
	Purchase, rental or leasing and installation of mac	hinery	¬\$	□\$
	Construction or leasing of plant buildings and faci	-	_	
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ue of securities involved in this ets or securities of another	_	
	Repayment of indebtedness	-	_	_
	Working capital	_		
	Other (specify): investment in securities	-	_	
	oxide (opcorry).			
]\$	s
	Column Totals		¬\$	🗐 \$_unlimited
	Total Payments Listed (column totals added)		_	_
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acci	nish to the U.S. Securities and Exchange Commis	sion, upon writte	
SS	uer (Print or Type)	Signature	Date	
Sta	ark Criterion Fund Ltd.		April 30 , 2008	1
	me of Signer (Print or Type) ichael A. Roth	Title of Signer (Print or Type) Managing Member of Stark Criterion Management LLC, Inve	stment Manager of St	ark Criterion Fund Ltd.

– ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	Is any party described in 17 CFR 230.262 presently subprovisions of such rule?		Yes	No ×
	See Appendix,	Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to an D (17 CFR 239.500) at such times as required by state is		iled a no	ice on Form
3.	The undersigned issuer hereby undertakes to furnish to tissuer to offerees.	the state administrators, upon written request, informat	ion furr	iished by the
4.	The undersigned issuer represents that the issuer is fami limited Offering Exemption (ULOE) of the state in which of this exemption has the burden of establishing that the	h this notice is filed and understands that the issuer clai		
	uer has read this notification and knows the contents to be tru athorized person.	ne and has duly caused this notice to be signed on its beha	lf by the	undersigned
Issuer ((Print or Type) Signature	Date		
Stark	Criterion Fund Ltd.	April 30, 2008		

Title (Print or Type)

Managing Member of Stark Criterion Management LLC, Investment Manager of Stark Criterion Fund Ltd.

E. STATE SIGNATURE

Instruction.

Name (Print or Type)

Michael A. Roth

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.

				AP	PENDIX		<u> </u>		
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item !)		amount pu	4 Finvestor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	common shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL							 		
AK									
AZ									
AR	<u> </u>								
CA									
со									
СТ									
DE							·		
DC									
FL	 								
GA	<u> </u>						<u>-</u>		
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МЕ									
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МА									
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MS									

			,	АРР	ENDIX	,		,	
1	Intend to non-a investor	2 If to sell accredited as in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	common shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО		×	"	2	75,000,000				×
MT									
NE									
NV									
NH									
ŊJ									
NM						· · · · · · · · · · · · · · · · · · ·			
NY		×	N			<u> </u>			×
NC		<u> </u>					· · · · · · · · · · · · · · · · · · ·		
ND									
ОН							· · · · · · · · · · · · · · · · · · ·		
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OR							<u> </u>		
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VT									
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WA				! 					
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wı				 					

			* * * .	e APP	ENDIX								
1		2	3 Type of security		4								
	to non-a	d to sell accredited rs in State 3-Item 1)	and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					amount purchased in State waiver grante			ation of granted)
State	Yes	No	common shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No				
WY													
PR													

