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

SEC Mail Processing Section

TEMPORARY FORM D

Section	TORM D		Nieu "UDe
200 00 2008	NOTICE OF SALE OF SE	CURITIES	lviali Processing Section
DEC 0 9 2008	PURSUANT TO REGUL		~ \/'
DC	SECTION 4(6), AN	•	OCT 3 X 2000
Washington, DC 195	UNIFORM LIMITED OFFERI	NC EVEMDTION	144 / (10)
Name of Offering (check if	this is an amendment and name has changed, and	indicate change.) FUTUYES FUN	Westington Oc
Filing Under (Check box(es) that ap Type of Filing: New Filing			
	A. BASIC IDENTIFICATIO	N DATA	
1. Enter the information request	ed about the issuer		
Name of Issuer (check if this is	an amendment and name has changed, and indicate	change.)	
Missit De	Ita Quantitation	ve Futures	FUNDILLC
Address of Executive Offices 9595. Cocst Dr	(Number and Street, City, S		ber (Including Area Code)
Address of Principal Business Opera	tions (Number and Street, City, S	State, Zip Code) Telephono	
(if different from Executive Offices)			
Brief Description of Business			
Com	modity Pool		08065656
Type of Business Organization		57 64 bar (alassa assaifa). 1 1	
corporation business trust	limited partnership, already formed limited partnership, to be formed	Other (please specify):	- PROCESSI
Actual or Estimated Date of Incorpor		Actual Estimated	SP DEC 1 8 2008
Jurisdiction of Incorporation or Orga	inization: (Enter two-letter U.S. Postal Service abbr		THOMOON DEN
CENEDAL INCOME MAN	CN for Canada; FN for other foreign ju		THOMSON REU
	e: This is a special Temporary Form D (17 CFR file with the Commission a notice on Temporary		
notice in paper format on or after	September 15, 2008 but before March 16, 2009.	During that period, an issuer also	may file in paper format an
comply with all the requirements	FR 239.500) but, if it does, the issuer must file at of § 230.503T.	mendments using Form D (17 CFR	239.500) and otherwise
Federal:	-		
seq. or 15 U.S.C. 77d(6).	g an offering of securities in reliance on an excep	ption under Regulation D or Section	i 4(6), 17 CFR 230.501 et
When To File: A notice must be f	iled no later than 15 days after the first sale of s	ecurities in the offering. A notice is	deemed filed with the U.S.
address after the date on which it	on (SEC) on the earlier of the date it is received is due, on the date it was mailed by United States	by the SEC at the address given be registered or certified mail to that	low or, if received at that address.
Where To File: U.S. Securities and	l Exchange Commission, 100 F Street, N.E., Was	thington, D.C. 20549.	
	of this notice must be filed with the SEC, one of ally signed copy or bear typed or printed signatur		ne copy not manually signed
Information Required: A new filin	g must contain all information requested. Amend	ments need only report the name of	of the issuer and offering,
any changes thereto, the information Part E and the Appendix need not	on requested in Part C, and any material changes	from the information previously s	upplied in Parts A and B.
Filing Fee: There is no federal fili			
State: This notice shall be used to indica	ate reliance on the Uniform Limited Offering Exc	emption (III OE) for cales of securi	ties in those states that
have adopted ULOE and that have	adopted this form. Issuers relying on ULOE mu	st file a separate notice with the S	ecurities Administrator in
each state where sales are to be, of fee in the proper amount shall acc	r have been made. If a state requires the paymen company this form. This notice shall be filed in (t of a fee as a precondition to the	claim for the exemption, a
Appendix to the notice constitutes	a part of this notice and must be completed.	me appropriate states in accordance	with state law. HC
	ATTENTION		
Failure to file notice in the a	ppropriate states will not result in a loss of	the federal exemption. Conve	rsely, failure to file the
appropriate tederal notice v	vill not result in a loss of an available state e	xemption unless such exemption	on is predictated on the

filing of a federal notice.

SEC 1972 (9-08)

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OMB APPROVAL

Estimated average burden

hours per response. 4.00

OMB Number:

Expires:

3235-0076

October 31, 2008

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)										
MisFit Finencial Group, LLC Business or Residence Address (Number and Street, City, State, Zip Code)										
959 S. Coast Dr. Suite 415, Costa Mesa, CA	92626									
959 S. Coast Dr., Suite 415, Costa Mesa, CA 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)										
Same as above	1									
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)										
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 necessar	y)									

				B. IN	FORMATI	ON ABOU	T OFFERI	NG				
1. Has the	issuer solo	L or does ti	he iccuer in	itend to sel	l to non-ac	credited in	vestors in	this offeri	ne?		Yes	No □
i. Has the	133uci 30ic	i, or does n			Appendix.						۳	u
	.,										e10	0,00
2. What is	the minim	um investn	nent that w	ill be acce	pted from a	ny individ	uai?				-	
3. Does tl	ne offering	permit join	t ownershi	p of a sing	le unit?		•				Y es	No
	he informat											
	ssion or sim son to be lis											
or state	s, list the na	ame of the b	oroker or de	aler. If mo	ore than five	(5) person	is to be list	ed are asso	ciated pers	ons of such	n	
a broke	er or dealer	, you may s	et forth the	e informati	on for that	broker or	dealer only	<u>'. </u>				
Full Name	(Last name	first, if ind	ividual)									
Business or	Residence	Address (N	Number and	i Street, Ci	ty, State, Z	ip Code)						
Name of A	ssociated B	roker or De	aler		· -							**************************************
States in W	hich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	"All State										. Al	l States
(Check	7111 011110	3 Of Check	marriada	outes,								
AL	AK	AZ.	AR	CA	ഥ	CT	DE	DC	FL.	GA	Ш	Œ
IL.	IN	IA	KS	KY	I.A	ME	MD	MA	MI	MN	MS	MO
MT	NE	NY	NH	NL	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	SD	TN	TX	UT.	VT	VA	WA	WV	WL	WY	[PR]
Business o				nd Street, C	City, State,	Zip Code)				<u></u>		
Name of A	ssociated B	roker or De	aler									
States in W	hich Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Checl	c "All State	s" or check	individual	States)					•••••		. 🔲 Al	l States
ΙΑΪ	AK	AZ	AR	(CA)	CO	CT	DE	DC	FI.	GA	HI	מו
	IN	UA.	KS	KY)	I.A.	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NI	NM	NY	NC		ОН	OK	OR	PA
RL	SC	SD	TN	TX	ūr	VT	VA	WA	wy	wi	WY	PR
Full Name												
Business o	r Residenc	e Address (Number ar	id Street, C	City, State,	Žip Code)						
Name of A	ssociated B	roker or De	ealer									
States in W	hich Perso	n Listed Ha	ıs Solicited	or Intends	to Solicit	Purchasers						
(Checl	k "All State	s" or check	individua	States)	•••••	••••••	••••••	•••••			. 🔲 AI	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	(FL)	GA	HI	Œ
IL	IN	[A]	KS	KY	LA	ME	MD	MA	ML	MN	MS	MO
MT	NE	NV	NH	N	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	SD	TN	TX	UT	ŸΤ	VA	WA	$\mathbf{w}\mathbf{v}$	$\mathbf{w}_{\mathbf{I}}$	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 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
		Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	_ \$
	Equity	<u> </u>	_ \$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify LLC INTERESTS	100 mi	\$5,082,635
	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."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	3	\$5,082,635
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.			
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		
	Regulation A		. \$
	Rule 504		\$
	Total		
	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		_ ¬ \$
	Legal Fees		\$ 10,000
	Accounting Fees	•] \$
	Engineering Fees	•] \$
	Sales Commissions (specify finders' fees separately)] \$
	Other Expenses (identify)		\$
	Total		z <u> </u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ <u>99,990,</u> 000
5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	<u></u>	_ 🗆 \$
Purchase of real estate	☐ \$	\$
Purchase, rental or leasing and installation of machinery and equipment		_ 🗆 \$
Construction or leasing of plant buildings and facilities		
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	s	_ []\$
Repayment of indebtedness	s	_ 🗆 \$
Working capital	\$	_ 🗆 \$
Other (specify): To Invest	 \$	199,990,00
	s	[] \$
Column Totals		D899,990,00
Total Payments Listed (column totals added)	≥ (\$_	<u>19,990,000</u>
D. FEDERAL SIGNATURE		1
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Committhe information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ssion, upon writt	tule 505, the following ten request of its staff,
Issuer (Print or Type) += Q. Signature LISE; + De += Q. LUTURES FUND, LLC	Date 1013	0108
Name of Signer (Print or Type) Title of Signer (Print or Type)		

ATTENTION

General Counsel

Dave Allen

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

·	·	E. STATE SIGNATURE		
1.		62 presently subject to any of the disqual		_
		See Appendix, Column 5, for state response	nse.	
2.	The undersigned issuer hereby undertake D (17 CFR 239.500) at such times as re		y state in which this notice is filed a notice on	Form
3.	The undersigned issuer hereby undertal issuer to offerees.	tes to furnish to the state administrators, t	pon written request, information furnished t	y the
4.	limited Offering Exemption (ULOE) of		hat must be satisfied to be entitled to the Un nderstands that the issuer claiming the availa satisfied.	
	uer has read this notification and knows the thorized person.	contents to be true and has duly caused this	notice to be signed on its behalf by the unders	igned
MIS	Print or Type) Sit Delta Q. Sures Fund, LLC	Signature	Date 10130108	
Name (Print or Type)	Title (Print or Type)		
\sim	ive Allen	General Co.	JMSE/	

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.

1		2	3		5 Disqualification				
	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 amount pu (Part		under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	:								
AK									
ΑZ									1
AR									
CA	✓		100 mil.	3	5,082, 635				~
CO									
СТ								-	
DE									
DC									
FL									
GA									
Щ									
ID									
IL									
IN									
ΙA									
KS									
KY									
LA									
ME									
MD									
MA		<u> </u>							
MI								ļ	
MN									
MS									

APPENDIX

APPENDIX										
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		under Sta (if yes, explana waiver	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited				No	
МО										
МГ										
NE										
NV										
NH										
NJ										
NM										
NY										
NC										
ND										
ОН										
ок										
OR										
PA										
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA										
WA										
wv										
WI										

				APPI	ENDIX	<u> </u>			
ì		2	3			5 Disqualification			
	to non-a	i to sell accredited as in State a-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		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

