FORM D'

Mall Processing Section FEB 2 4 2009 Washington. DC

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

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

1013	760					
OMB A	PPROVAL					
OMB Number:	3235-0076					
Expires: February 28, 2009						
Estimated average	burden					
Hours per response	e: 16.00					
SEC US	SE ONLY					
Prefix	Serial					
DATE R	ECEIVED					
j	·					

Perry Partners International, Inc. relating to Class F Shares and Class H	Shares	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 505	ule 506 L Section	4(6) ULOE
Type of Filing: New Filing Amendment		200 PART (101 PA
A. BASIC IDENTIF	ICATION DATA	
Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and name has changed, and	indicate change.)	09003488
Perry Partners International, Inc.		
Address of Executive Offices (Number and Street, City, State, Zip Code)		Telephone Number (Including Area Code)
c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park	, West Bay	(345) 949-3977
Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Islands		
Address of Principal Business Operations (Number and Street, City, State, Zip (if different from Executive Offices)	Code) PROC	Telephone Number (Including Area Code)
Brief Description of Business To operate as a private international business	s company	5 and P
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	•	r (please specify): An International Business Company organized under the laws of the British Virgin Islands
Actual or Estimated Date of Incorporation or Organization: Month 04	Year 93	
A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Ime of Issuer (check if this is an amendment and name has changed, and indicate change.) Ime of Issuer (check if this is an amendment and name has changed, and indicate change.) Imp Partners International, Inc. Idress of Executive Offices (Number and Street, City, State, Zip Code) O Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay D Citco Fund Services (Cayman Islands) D Citco Fund		

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500T) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a 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 initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

Federal:

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: Two (2) 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.

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 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.

Full Name (Last name first, if individual) Perry, Richard C. Business or Residence Address c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Island Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partne Full Name (Last name first, if individual) Leff, Paul A. Business or Residence Address c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Island Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partne Full Name (Last name first, if individual) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partne Full Name (Last name first, if individual) Cook, Mark Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Island Cayman, C		,			A DACIOIDEN	TIELC ATTON DATA		
o Each promoter of the issuer, if the issuer has been organized within the past five years; o 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 securi of the issuer; o Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and o Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partnership issuers; and organized within the past five years; o Each secretive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and organized within the past five years; o Each beneficial owner of the issuer, if individual partnership issuers and of corporate general and managing partners of partnership issuers; and organized within the past five years; o Each beneficial owner of corporate issuers and of corporate general and managing partners of partnership issuers; and organized within the past five years; o Each secutive Officer Director General and/or Managing Partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partnership issuers. Full Name (Last name first, if individual) Cook, Mark Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Director General and/or Managing Partnership issuers.					A. BASICIDEN	TIFICATION DATA		<u> </u>
o 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 securiof the issuer; o Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and o Each general and managing partner of partnership issuers. Check Box(es) that Apply:	2.	Ente	er the informati	on requested for th	e following:			
of the issuer; o Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and o Each general and managing partner of partnership issuers. Check Box(es) that Apply:		0	Each promote	r of the issuer, if th	e issuer has been organized	within the past five years;		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Perry, Richard C. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Islands) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Leff, Paul A. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Island Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Cook, Mark Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Island Check Box(es) that Apply: Road Cayman Street, City, State, Zip Code) Cook, Mark Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Island		o		al owner having the	e power to vote or dispose, o	or direct the vote or disposition	n of, 10% or more o	f a class of equity securities
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Full Name (Last name first, if individual) Perry, Richard C. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Island Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Leff, Paul A. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Island Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Cook, Mark Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Island Cook, Mark Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Islands)		0	Each general	and managing partr	er of partnership issuers.			
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c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Islands			ast name first, i	f individual)				
							6 Grand Cayman K	V1-1205 Cayman Islands
				Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Agemian, Patrick				f individual)				
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citco Fund Services (Cayman Islands) Limited, Regatta Office Park, West Bay Road, P.O. Box 31106, Grand Cayman, KY1-1205, Cayman Island							6, Grand Cayman, K	Y1-1205, Cayman Islands
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or								
Full Name (Last name first, if individual)	Full Na	me (L	ast name first, i	f individual)				
Business or Residence Address (Number and Street, City, State, Zip Code)	Busines	s or R	esidence Addre	ess (Numbe	er and Street, City, State, Zip	Code)		

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

	'				R	INFORMA	TION A'RO	OUT OFFF	RING				
1	Uac sh -	icener sel	d or door t	no icona- :-						?	Yes	No ⊠	
1.								vesiors in t	ins offering	í	Ц		
2.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												
	Has the issuer sold, or does the issuer intend to scil, to non-accredited investors in this offering?												
4.													
	agent of	f a broker o	or dealer re	gistered wi	th the SEC	and/or wit	h a state or	states, list	the name of	f the broke	r or dealer.	If more the	an five (5)
	•		d are assoc	iated perso	ns of such	a broker or	dealer, you	ı may set fo	orth the info	rmation fo	r that broke	er or dealer	only. Not
Eull Ma			if individ	ual)									
	•		·	·									
Busines	s or Res	idence Ado	dress (Num	ber and Str	eet, City, S	tate, Zip C	ode)						
Name o	f Associ	ated Broke	r or Dealer										
States in	n which l	Person Lis	ted Has Sol	licited or Ir	tends to So	olicit Purch	asers						
((Check "A	All States"	or check in	dividual St	ates)							☐ Al	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]		[ID]
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(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		Agg	regate Offering Price		Amount Already Sold
Debt		\$	0	\$	0
Equity		\$5,0	00,000,000	\$1,2	20,470,644
	[X] Common [] Preferred				
Convertible Securities (in	cluding warrants)	\$	0	\$	0
Partnership Interests		\$	0	\$	0
Other (Specify)	\$	0	\$	0
	Annandiy Calumn 2 if filing under UI OF	\$5,0	000,000,000	\$1,2	20,470,644

Answer also in Appendix, Column 3, if filing under ULOE.

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 Amour Purcha	nt of
Accredited Investors	139	\$1,220,470	,644
Non-accredited Investors	0	\$ 0	
Total (for filing under Rule 504 only)		<u>\$</u>	

Answer also in Appendix, Column 4, if filing under ULOE.

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		\$
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 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	[x]	\$
Printing and Engraving Costs	[x]	<u>\$*</u>
Legal Fees	[x]	\$*
Accounting Fees	[x]	\$*
Engineering Fees	[x]	\$
Sales Commissions (specify finders' fees separately)	[x]	\$
Other Expenses (identify)	[x]	<u>\$*</u>
Total	[x]	\$0*

^{*}All offering and organizational expenses have been amortized.

<u>. </u>	C. OFFERING PRICE, NUMBER OF INV	ESTOR	S, EXF	EN	SES AND USE OF	PR	OCEI	EDS
5.	b. Enter the difference between the aggregate offering price given in expenses furnished in response to Part C - Question 4.a. This differe issuer."	ence is th	e "adjı	ustec	l gross proceeds to	the	the	\$5,000,000,000
J,	purposes shown. If the amount for any purpose is not known, furnish estimate. The total of the payments listed must equal the adjusted gro C - Question 4.b above.	h an esti	mate a	nd cl	neck the box to the	: left	of the	
					Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees		[]	\$	[]	\$
	Purchase of real estate		[]	\$	[]	\$
	Purchase, rental or leasing and installation of machinery and equipme	ent	[]	\$	[]	\$
	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 a securities of another issuer pursuant to a merger)		[]	\$	[]	\$
	Repayment of indebtedness		[]	\$	[]	\$
	Working capital		[]	\$	[]	\$
	Other (specify): Investment Capital		_ [x]	\$5,000,000,000	[]	\$
	Column Totals.		[x	1	\$5,000,000,000	Г	1	\$
	Total Payments Listed (column totals added)	********		•	[x] <u>\$</u>	5,00	0,000	
	D. FEDER	RAL SIG	NATU	RE				
sig	e issuer has duly caused this notice to be signed by the undersigned dul nature constitutes an undertaking by the issuer to furnish to the U.S. Se formation furnished by the issuer to any non-accredited investor pursuar	curities	and Ex	cha	nge Commission, u			
Iss	uer (Print or Type) Sign	nature					I	Pate 1-4 09
	rry Partners International, Inc.		X					2/23/09

Title of Signer (Print or Type) Name of Signer (Print or Type) Michael Neus Managing Director and General Counsel

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 10001.)

	E. STA	TE SIGNATURE	1						
1.	Yes N . Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?								
	See Appendix, Column 5, f	or state response. Not applicable							
2.	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. Not applicable								
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. Not applicable								
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. Not applicable								
	e issuer has read this notification and knows the contents to be dersigned duly authorized person.	be true and has duly caused this notice to be signed	on its behalf by the						
Iss	uer (Print or Type)	Signature Dat	123/09						
Pe	rry Partners International, Inc.	//	~(~ 1						
Na	me (Print or Type)	Title (Print or Type)							
M	chael Neus	Managing Director and General Counsel							

Instruction:

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.

APPENDIX

PERRY PARTNERS INTERNATIONAL, INC.

				KINEKS IN	TERNATIONA	L, INC.			
1	2		3			5 Net Applicable			
	Intend to non-acc investe Sta (Part B-	redited ors in ite	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of i	nvestor and amou (Part C-Ite	Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
	(Class F Shares and		<u> </u>			•	
State	Yes	No	Class H Shares Par Value U.S. \$0.01 Per Share \$5,000,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK								· -	
AZ									
AR		·							
CA		х	Х	24	\$177,168,066	0	0		
СО									
СТ		Х	Х	2	\$5,250,000	0	0		
DE		Х	Х	5	\$22,435,000	0	0		
DC		Х	X	2	\$20,774,758	0	0		
FL		Х	X	2	\$770,000				
GA		Х	Х	1	\$10,000,000	0	0		
HI									
ID									
IL		Х	X	8	\$105,100,000	0	0		
IN		Х	Х	2	\$9,000,000	0	0		
IA									
KS		Х	Х	1	\$4,300,000	0	0		
KY									
LA									
ME		Х	Х	1	\$7,000,000	0	0		
MA		х	Х	18	\$210,459,227	0	0	_	
MD		х	Х	2	\$45,000,000	0	0		
MI		Х	Х	4	\$37,776,537	0	0		
MN								<u> </u>	
MS									
МО		Х	Х	2	\$12,000,000	0	0		
MT								ř	

APPENDIX PERRY PARTNERS INTERNATIONAL, INC. 2 5 3 Not Applicable Disqualification Type of security and under State ULOE Intend to sell to non-accredited aggregate offering (if yes, attach investors in price offered in state explanation of (Part C-Item 1) waiver granted) State Type of investor and amount purchased in State (Part E-Item 1) (Part B-Item 1) (Part C-Item 2) Class F Shares and Class H Shares Par Value Number of U.S. \$0.01 Number of Non-Per Share Accredited Accredited \$5,000,000,000 Investors Investors State Yes No Amount Yes No Amount NE NC ND NE NH X X 1 \$2,000,000 0 0 NJ X Х 4 0 0 \$27,400,000 NM Х X 1 \$1,000,000 0 0 NV Х X 3 \$8,000,000 0 0 NY X X 0 0 36 \$217,592,806 OH X X 2 \$16,500,000 0 0 X OK X 5 \$45,444,250 0 0 OR PA Х \mathbf{X} 4 \$61,000,000 0 0 RI SC SD TN X TX X 5 \$73,000,000 0 0 UT VT VA X X 2 \$37,500,000 0 0 WA WV X X 1 \$60,000,000 0 0 WI X X \$4,000,000 0 0



WY PR