

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TEMPORARY FORM D

OMB APPROVAL

OMB NUMBER: 3235-0076 February 28, 2009

Expires: Estimated average burden hours per response.....4.00

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

Name of Offering (check if this is an	amendment and name has changed, and indicate change	.)
Offer and Sale of Limited Partnership Inter		
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ 5	Section 4(6) ULOE
	Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the	ne issuer	
Name of Issuer (Check if this is an arr	nendment and name has changed, and indicate change.)	
GTIS Brazil Real Estate Fund (U.S. Dollar) LP	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
c/o GoldenTree InSite Partners II LP, 300 F	Park Avenue, New York, NY 10022	212-220-5200
Address of Principal Business Operations	(Number and Street, City, State, Zip Co	(Company Number (Including Area (Company)
(if different from Executive Offices)	PRUCE	Mail Processing
		Section Section
Brief Description of Business	MAR 2	7003
	THOMSON	
Real Estate Investment	1028201	1 BFAIERS
Type of Business Organization	THOINION	
□ corporation	☑ limited partnership, already formed ☐ c	other (please specify): Washington, DC
□ business trust	☐ limited partnership, to be formed	100
Actual or Estimated Date of Incorporation of	č	⊠ Actual □ Estimated
Jurisdiction of meorpolation of Organizatio	nn: (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction)	D E

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 239.500) 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, 100 F Street, N.E., 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. The copy not manually signed must be a photocopy 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.

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 Partner Full Name (Last name first, if individual) GTIS Brazil Real Estate Fund GP LLC Business or Residence Address (Number and Street, City, State, Zip Code) c/o GoldenTree InSite Partners II LP, 300 Park Avenue, New York, NY10022 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner □ Executive Officer ☐ Director the general partner Full Name (Last name first, if individual) Cheng, Grace Business or Residence Address (Number and Street, City, State, Zip Code) c/o GoldenTree InSite Partners II LP, 300 Park Avenue, New York, NY 10022 Check Box(es) that Apply: □ Promoter ■ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Continental Casualty Company Business or Residence Address (Number and Street, City, State, Zip Code) 333 S. Wabash Avenue, Chicago, IL 60604 Check Box(es) that Apply: □ Promoter ☑ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Wagner M. Leon Business or Residence Address (Number and Street, City, State, Zip Code) 8 Lincoln Woods, Purchase, NY 10577 ☐ General and/or ☐ Executive Officer □ Director Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Beneficial Owner

(Number and Street, City, State, Zip Code)

□ Beneficial Owner

(Number and Street, City, State, Zip Code)

☐ Executive Officer

□ Executive Officer

□ Director

□ Director

☐ General and/or Managing Partner

☐ General and/or Managing Partner

Check Box(es) that Apply:

Business or Residence Address

Business or Residence Address

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Full Name (Last name first, if individual)

☐ Promoter

□ Promoter

				B. INFO	ORMATIO	N ABOUT	OFFERI	١G	_			
	·/ · · · · · · · · · · · · · · · · · ·									Y	es N	10
1. Has the iss	uer sold, oi	does the is	suer intend	to sell, to n	on accredit	ed investor	s in this off	ering?				ğ.
			Ans	wer also in	Appendix, (Column 2,	if filing und	ler ULOE.				
2. What is the	e minimum	investment	that will be	e accepted t	from any inc	dividual?		************		1	\$_N/A	
				•	, ,						es N	10
3. Does the o	ffering per	mit joint ow	nership of	a single uni	t?		,					3
4. Enter the in remuneration agent of a bro persons to be Full Name (L.	for solicita ker or deale listed are a	tion of purc er registered ssociated pe	hasers in co I with the S crsons of su	onnection w EC and/or	ith sales of with a state	securities i or states, li	n the offeri	ng. If a per of the brok	son to be li	sted is an a	ssociated than five (person or
/ (2)		,										
Business or R	esidence A	ddress (Nu	nber and St	reet, City,	State, Zip C	ode)						
Name of Asso	ociated Bro	ker or Deale	er									
States in Whi	ch Person I	isted Has S	Solicited or	Intends to S	Solicit Purch	nasers						
(Check "	All States"	or check ind		•							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]
Full Name (L	ast name fi	rst, if indivi	dual)									
Business or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	ode)			_			
Name of Asse	ociated Bro	ker or Deal	er				· , ,					
States in Whi					Solicit Purc	hasers			<u> </u>		All State	
•		or check in		(CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[AL] [IL]	[AK] [IN]	[AZ] [lA]	[AR] [KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[0/1] [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]
Full Name (L	 			<u> </u>								
(,	,									
Business or R	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Ass	ociated Bro	ker or Deal	er									
States in Whi											All State	<u></u>
(Check "	All States [AK]	or check in [AZ]	aividuai St [AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	⊔ [GA]	[HI]	s [ID]
[AL]	[IN]	[AZ]	[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]	ITXI	[UT]	IVTI	ſVAl	[WA]	[WV]	[WI]	[WY]	[PR]

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	\$	
	Equity	\$	
		Ψ	Ψ
	□ Common □ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$500,000,000	\$ <u>21,993,900</u>
	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 Amoun of Purchases
	Accredited Investors	12	\$21,993,900
	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, 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	Dollar Amoun
	Rule 505	Security	Sold \$
	Regulation A		_
	Rule 504		
	Total	0	
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.		Ψ
	Transfer Agent's Fees	**************	□ \$
	Printing and Engraving Costs		□ \$
	Legal Fees		■ \$167,500
	Accounting Fees		\$
	Engineering Fees		□ \$
	Sales Commissions (specify finders' fees separately)		□ \$
	Other Expenses (identify)		□ \$
	Total		

b. Enter the difference between the aggreg	E. NUMBER OF INVESTORS, EXPENSES AND USE tate offering price given in response to Part C - Question	OF I	KUA	EEDS			
I and total expenses furnished in respon- adjusted gross proceeds to the issuer."					\$499,830	2,500	
used for each of the purposes shown. If the estimate and check the box to the left of the	gross proceeds to the issuer used or proposed to be a amount for any purpose is not known, furnish an e estimate. The total of the payments listed must equal at forth in response to Part C - Question 4.b above.		OI Di	ments to Dicers, frectors, of Diffiates		Payment Other	
Salaries and fees			\$			\$.	
Purchase of real estate			\$. 0	\$	
Purchase, rental or leasing and installa	tion of machinery and equipment		\$.			\$	
Construction or leasing of plant buildi	ngs and facilities		\$			\$.	
offering that may be used in exchange	ling the value of securities involved in this for the assets or securities of another	П	\$		П	\$	
-			•			\$	
			8			S	
Other (specify):			\$			\$	
						ar .	
		_		•		\$	
Column Totals			3			\$	
Total Payments Listed (Column totals	added)			□ \$	0		
	D. FEDERAL SIGNATURE				·		
The issuer has duly caused this notice to be si	gned by the undersigned duly authorized person. If this noti	ce is	filed	under Ri	ile 50	5. the	
following signature constitutes an undertal	cing by the issuer to furnish to the U.S. Securities and Excha e issuer to any non-accredited investor pursuant to paragraph	nge ('omm	ission, u	pon v		juest
ssuer (Print or Type)	Signature		Date	e		······································	
GTIS Brazil Real Estate Fund (U.S. Dolfar) LP	Than Co			3/11		9	
Same of Signer (Print or Type)	Title of Signer (Print or Type)					***************************************	
irace Cheng	Vice President of GTIS Brazil Real Estate Fund GP, LLO	C. the	gene	eral parte	er of	the Issuer	r

--- ATTENTION -

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

