FORM D	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					
Name of Offering ([]] check if this Reynard International Partners, Ltd. (the "Is	s is an amendment and name has changed, and in ssuer")	ndicate change.)				
Filing Under (Check box(es) that apply):         Type of Filing:       [X] New Filing	[] Rule 504 [] Rule 505 [X] Rule [] Amendment A. BASIC IDENTIFICATION DATA	e 506 [] Section 4(6) [] ULOE SEC Mail Processing Section MAR 1 3 2009				
Enter the information requested about the issu Name of Issuer ([]] check if this Reynard International Partners, Ltd.	s is an amendment and name has changed, and in					
	er and Street, City, State, Zip Code) I <b>p, Bison Court, P.O. Box 3460, Road Town,</b>	te) Telephone Number (Including Area Code)				
Address of Principal Business Operations (Nu (if different from Executive Offices) c/o Reyna Avenue, Suite 3101, New York, New York 1	rd Asset Management, Inc., 623 Fifth	Telephone Number (Including Area Code) (212) 808-7373				
Brief Description of Business The Issuer seeks to invest in securities who	ere there appear to be significant discrepancie	es between market value and intrinsic worth.				
Type of Business Organization          []       corporation         []       business trust	<ul><li>I limited partnership, already formed</li><li>I limited partnership, to be formed</li></ul>	[ X ] other (please specify): British Virgin Islands Exempted Company				
Actual or Estimated Date of Incorporation or C Jurisdiction of Incorporation or Organization:		on for State:				
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 andice 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 239.500T) 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 exception 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 (SCC) 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. <i>Information Required</i> : 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. <i>Filing Fee</i> : There is no federal filing fee. <i>State:</i> This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities						
		d unless the form displays a currently valid OMB control number.				

ne in the second s	A. BASIC IDENT	FICATION DATA	and the second s	an a
Enter the information requested for the f	-	<b>.</b>		
<ul> <li>Each promoter of the issuer, if the i</li> <li>Each beneficial owner having the p</li> </ul>			10% or more of a	class of equity
<ul> <li>Each beneficial owner having the p securities of the issuer;</li> </ul>	ower to vote or dispose, or d			class of equily
Each executive officer and director	of corporate issuers and of c	corporate general and managi	ng partners of partr	ership issuers; and
<ul> <li>Each general and managing partne</li> </ul>	r of partnership issuers.			· · · · · · · · · · · · · · · · ·
Check Box(es) that Apply: [X] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) Reynard Asset Management, Inc. (the "Inv	vestment Manager")			
Business or Residence Address (Numb 23 Fifth Avenue, Suite 3101 New York, New York 10022 USA	per and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: [ ] Promoter	[ ] Beneficial Owner	[] Executive Officer	[X] Director	[ ] General and/or Managing Partner
Full Name (Last name first, if individual) G <b>hisletta, Aldo</b>				
Business or Residence Address (Numb c/o dms Management, Ltd., P.O.Box 31910 Grand Cayman, Cayman Islands British V	per and Street, City, State, Zi D SMB, British American C Vest Indies	p Code) entre, Tower 3		
Check Box(es) that Apply: [ ] Promoter	[ ] Beneficial Owner	[] Executive Officer	[X] Director	[ ] General and/or Managing Partner
<sup>-</sup> ull Name (Last name first, if individual) <b>Bree, David</b>				
Business or Residence Address (Numb c/o dms Management Ltd., Ansbacher Ho Grand Cayman, Cayman Islands	per and Street, City, State, Zi use, 20 Genesis Close, 2nd	p Code) I Floor, PO Box 31910 SMB		
Check Box(es) that Apply: [ ] Promoter	[] Beneficial Owner	[] Executive Officer	[X] Director	[ ] General and/or Managing Partner
<sup>E</sup> ull Name (Last name first, if individual) <b>Katz, Michael</b>				
Business or Residence Address (Numb c/o Reynard Asset Management, Inc., 623 New York, New York 10022 USA	per and Street, City, State, Z Fifth Avenue, Suite 3101	p 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 (Numb	per and Street, City, State, Z	p 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 (Numb	per and Street, City, State, Z	ip Code)		

Business or Residence Address ιτy, e, zip U ι,

B. INFORMATION ABOUT OFFERING						
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						
2. What is the minimum investment that will be accepted from any individual?	100,000					
(* Subject to waiver by the board of directors of the Issuer.) 3. Does the offering permit joint ownership of a single unit?						
<ul> <li>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.</li> </ul>						
Full Name (Last name first, if individual) <b>Not applicable.</b>						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Name of Associated Broker or Dealer						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	States					
AL []       AK []       AZ []       AR []       CA []       CO []       CT []       DE []       DC []       FL []       GA []       HI         IL []       IN []       IA []       KS []       KY []       LA []       ME []       MD []       MA []       MI []       MN []       MS         MT []       NE []       NV []       NH []       NJ []       NM []       NY []       NC []       ND []       OH []       OK []       OR         RI []       SC []       SD []       TN []       TX []       UT []       VA []       WA []       WV []       WI []       WY	I [] ID []					
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Name of Associated Broker or Dealer						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	0+-+					
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Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Name of Associated Broker or Dealer						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)						
AL [] AK [] AZ [] AR [] CA [] CO [] CT [] DE [] DC [] FL [] GA [] HI         IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] MS         MT [] NE [] NV [] NH [] NJ [] NM [] NY [] NC [] ND [] OH [] OK [] OF	States I [ ] ID [ ] S [ ] MO [ ] R [ ] PA [ ] Y [ ] PR [ ]					

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ <u>o</u>	\$ <u>0</u>
Equity:	\$ <u>0</u>	\$ <u>0</u>
Common     Preferred		
Convertible Securities (including warrants):	\$ <u>o</u>	\$ <u>0</u>
Partnership Interests	\$ <u>0</u>	\$ <u>0</u>
Other (Specify: common shares, par value \$0.01 (U.S.) per share (the "Interests"))	\$ <u>1,000,000,000(a)</u>	\$ <u>10,031,822</u>
Total	\$ <u>1,000,000,000(a)</u>	\$ <u>10,031,822</u>
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	<u>15</u>	\$ <u>10,031,822</u>
Non-accredited Investors	<u>0</u>	\$ <u>0</u>
Total (for filings under Rule 504 only)	<u>N/A</u>	\$ <u>N/A</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	<u>N/A</u>	\$ <u>o</u>
Regulation A	<u>N/A</u>	\$ <u>o</u>
Rule 504	<u>N/A</u>	\$ <u>0</u>
Total	<u>N/A</u>	\$ <u>0</u>
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	X	\$ 0
Printing and Engraving Costs	X	\$ <u>2,500</u>
Legal Fees	$\mathbf{X}$	\$ <u>35,000</u>
Accounting Fees	X	\$ 7,500
Engineering Fees	X	\$ <u>0</u>
Sales Commissions (specify finders' fees separately)	X	\$ <u>o</u>
Other Expenses (identify filing fees)	X	\$ <u>5,000</u>
Total	X	\$ <u>50,000</u>

(a) Open-ended fund; estimated maximum aggregate offering amount.

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

4. 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>999,950,000</u>

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes below. 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 adjustment gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

		Payment Officer	5,			
		Directors Affiliate				Payments to Others
Salaries and fees	X	\$	<u>0</u>	X	\$	<u>0</u>
Purchase of real estate	X	\$	<u>0</u>	X	\$	<u>0</u>
Purchase, rental or leasing and installation of machinery and equipment	X	\$	<u>0</u>	X	\$	<u>0</u>
Construction or leasing of plant buildings and facilities	X	\$	<u>0</u>	X	\$	<u>0</u>
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)	X	\$	<u>0</u>	X	\$	<u>0</u>
Repayment of indebtedness	X	\$	<u>0</u>	X	\$	<u>0</u>
Working capital	X	\$	<u>0</u>	X	\$	<u>0</u>
Other (specify): Portfolio Investments	X	\$	<u>0</u>	X	\$	<u>999,950,000</u>
Column Totals	X	\$	<u>0</u>	X	\$	<u>999,950,000</u>
Total Payments Listed (column totals added)	X		\$ <u>99</u>	99,95	0,00	<u>00</u>

## D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Reynard International Partners, Ltd.	Signature	Date 3/4/69
Name (Print or Type) <b>Michael Katz</b>	Title of Signer (Print or Type) Director of the Issuer	

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

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