FORM D OMB APPROVAL UNITED STATES 3235-0076 ESECURITIES AND EXCHANGE COMMISSION OMB Number RECEIVED Expires May 31, 2005 mated average burden Washington, D.C. 20549 \$ 2003 FORM D IIIN 04 2003 SEC USE ONLY VOTICE OF SALE OF SECURITIES Serial PURSUANT TO REGULATION D SECTION 4(6), AND/OR DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION Name of Offering (check if this is an amendment and name has changed, and indicate change.) TURBOFIRE FUND LLC (the "Issuer") □ uloe Filing Under (Check box(es) that apply): Rule 504 Rule 505 | Rule 506 Section 4(6) Type of Filing: New Filing M Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Turbofire Fund LLC Address of Executive Offices (Number and Street, City, State, ZIP Code) Telephone Number (Including Area Code) 103 Sabot Park, Manakin-Sabot, Virginia 23103 (804) 578-4500 Address of Principal Business Operations (Number and Street, City, State, ZIP Code) Telephone Number (Including Area Code) (if different from Executive Offices) same as above Brief Description of Business To invest in and trade a broad and essentially unrestricted range of financial instruments, which may include U.S. and non-U.S. equity securities (public and private), annuities, U.S. and non-U.S. government and corporate debt securities (public and private), foreign currencies, commodities, futures, repurchase and reverse repurchase agreements, interest rate, currency, commodity and equity swaps and caps, derivatives, rights and options on any of the foregoing and other investments, assets or ventures selected by the manager or a portfolio manager. Type of Business Organization other (please specify): limited liability company corporation limited partnership, already formed business trust limited partnership, to be formed Year Month

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization:

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.

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CN for Canada; FN for other foreign jurisdiction)

0 1

Actual A

Estimated

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State

Copies Required: Five (5) 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.

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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 Annaging Partne	er							
Full Name (Last name first, if individual) James River Capital Corp. (the "Manager")								
Business or Residence Address (Number and Street, City, State, Zip Code) #118 Estate Mt. Welcome, Suite #4, Chandlers Wharf, Christiansted, St. Croix, U.S. Virgin Islands 00802								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partne	er							
Full Name (Last name first, if individual) Saunders, Paul H.								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o James River Capital Corp., #118 Estate Mt. Welcome, Suite #4, Chandlers Wharf, Christiansted, St. Croix, U.S. Virgin Islands 00802								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partne	er							
Full Name (Last name first, if individual) Brandt, Kevin M.								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o James River Capital Corp., #118 Estate Mt. Welcome, Suite #4, Chandlers Wharf Christiansted, St. Croix, U. S. Virgin Islands 00802								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partne	er							
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	er							
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 Partne	er							
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 Partne	er							
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 necessary.)

-200				D	INFORM	ATION A	OUT OFF	EDING				-	
-				В.	INFORM	ATION A	BOUT OFF	ERING				YES	NO
1. Has th	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.										\boxtimes		
2. What i										\$100,00	00*		
	subject to the discretion of the Manager to lower such amount.								,,	YES ⊠	NO		
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.													
Full Name (La	st name firs	st, if indivi	dual)										
James River	Securities :	Corn.											
Business or Re			mber and S	Street, City	State, Zip	Code)					***		*****
103 Sabot P	ark, Mana	kin-Sabot	, Virginia	23103									
Name of Asso	ciated Brok	er or Deal	er					***					
States in Whic	h Person Li	sted Has S	Solicited or	Intends to	Solicit Pur	chasers							
	"All States			States)								All States	
[AL]	[AK]	[AZ]	[AR]	[SA]	[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]	[NM] [UT]	[NY] [VT]	[NC] [> /&]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Name (Last name first, if individual)													
Business or Re	esidence Ad	dress (Nu	mber and S	Street, City,	, State, Zip	Code)							
Name of Asso	ciated Brok	er or Deal	er				h-Mr. Share	* 3400 %	- W- W-			A Section of the sect	
States in Whic	h Person Li	sted Has S	Solicited or	Intends to	Solicit Pur	chasers						_	
2						F. COTO 7						All States	
[AL]	[AK]	[AZ]	[AR]	[CA]			[DE]				[HI]	[ID]	
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name (Last name first, if individual)													
Business or Re	esidence Ad	dress (Nu	mber and S	Street, City,	, State, Zip	Code)	- W	1.11·2	-			<u></u>	
Name of Associated Broker or Dealer													
States in Whice	h Person Li	sted Has S	Solicited or	Intends to	Solicit Pu	chasers							
(Check "All States" or check individual 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]	[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]	

(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	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$0	\$0
	Common Preferred		
	Convertible Securities (including warrants)	\$0	\$0
	Partnership Interests	\$0	\$ 0
	Other (Specify units of limited liability company membership interest ("Units") (a)	\$50,000,000(b)	\$6,000,000
	Total	\$50,000,000(b)	\$6,000,000
	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."		Aggregato
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$6,000,000
	Non-accredited investors	0	\$0
	Total (for filings under Rule 504 only)	N/A	\$N/A
	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.		Dellan Amount
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$N/A
	Regulation A	N/A	\$N/A
	Rule 504	N/A	\$N/A
	Total	N/A	\$N/A
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		
	Legal Fees Legal Fees	_	
	Accounting Fees.		
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)		
	Other Expenses (identify) Filing fees		
	Total		
(a) (b)	The Issuer is offering two classes of Units, Class A Units and Class B Units. The Class B Units are curred Manager's principals, officers, directors, employees and affiliates thereof as well as long-time business offered to all other investors. The investors who purchase Class B Units are not subject to certain fees are subject. The Issuer may issue additional classes of Units at the Manager's discretion. Open-end fund; estimated maximum aggregate offering amount.	rently only being o associates. Class	ffered to the A Units are being

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPI	ENSES AND USE OF PROCEEDS
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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 proceed proceeds to the issuer."

\$49,900,000

Indicate below the amount of the adjusted gross proceeds 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		⊠	\$400,000	⊠ so	
Purchase of real estate		⊠	\$0	⊠ \$0	
Purchase, rental or leasing and installation of	f machinery and equipment	⊠	\$0	⋈ \$0	
Construction or leasing of plant buildings an	d facilities	⊠	\$0	\$0	
Acquisition of other businesses (including the offering that may be used in exchange for the	e assets or securities of another	_			
issuer pursuant to a merger)		X	\$0	⊠ \$0	
Repayment of indebtedness		⊠	\$0	⊠ \$0	
Working capital		⊠	\$0	\$0	
Other (specify): Portfolio investments		🛛	\$0	\$49,500,000	
		🛛	\$0	> \$0	
Column Totals		X	\$400,000	\$49,500,000	
Total Payments Listed (column totals added))		\$49,900,000		
	D. FEDERAL SIGNATURE		1 1 1		
The issuer has duly caused this notice to be signed by signature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-accredi	rnish to the U.S. Securities and Exchange Commissio	n, upon v			
Issuer (Print or Type) Turbofire Fund LLC	Signature II. By		Date		
Name of Signer (Print or Type)	Title of Signer (Print or Type)		May 20,	2003	
Kevin M. Brandt	President and Director of the Manager				

ATTENTION

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