FORM D .

1301653

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



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

Prefix

SEC USE ONLY

DATE RECEIVED

Serial

UNIFORM LIMITED OFFERING EXEMPTION						
Name of Offering (this is an amendment and name has changed, and indicate change.)						
Limited Liability Company Interests in Commonfund Institutional International Equity Fund, LLC Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE						
Type of Filing: New Filing Amendment						
A. BASIC IDENTIFICATION DATA						
1. Enter the information requested about the issuer						
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)						
Commonfund Institutional International Equity Fund, LLC						
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (including Area Code)						
c/o Commonfund Asset Management Company, Inc.						
15 Old Danbury Road (203) 563-5000						
P.O. Box 812						
Wilton, CT 06897						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (including Area Code)						
(if different from Executive Offices)						
Brief Description of Business						
Private Investment Fund						
Type of Business Organization						
☐ corporation ☐ limited partnership, already formed ☐ other (please specify): Limited Liability Company						
business trust						
Month Year	PARE					
Actual or Estimated Date of Incorporation or Organization: O 6 0 4	,E35E	リノ				
JAN 9	1 2005	F				
CN for Canada; FN for other foreign jurisdiction)	T 5007					
GENERAL INSTRUCTIONS THOSE	ISON					
FINA	ICIAL					
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 77d(6).	or 15 U.S.C					
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. Sec 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 dadue, on the date it was mailed by United States registered or certified mail to that address.		it is				
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.						
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 shotocopies of the manually signed copy or bear typed or printed signatures.						

the SEC.

Filing Fee: There is no federal filing fee.

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.

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

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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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - X Each promoter of the issuer, if the issuer has been organized within the past five years;
 - X 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;
 - X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - X Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer of the Managing Member	☑Director of the Managing Member	General and/or Managing Partner
Full Name (Last name first, Hutton, Lyn	<u> </u>				
	anagement Cor	mpany, Inc., 15 Old Da	nbury Road, P.O. Box 812, Wi	lton, CT 06897	
Check Box(es) that Apply:	Promoter	☐Beneficial Owner		☐Director of the Managing Member	General and/or Managing Partner
Full Name (Last name first, Strauss, Michael H.	·				
Business or Residence Add c/o Commonfund Asset M			o Code) nbury Road, P.O. Box 812, Wi		
Check Box(es) that Apply:		Beneficial Owner		☑Director of the Managing Member	General and/or Managing Partner
Full Name (Last name first, Long, Jeffrey T.					
	anagement Cor	mpany, Inc., 15 Old Da	nbury Road, P.O. Box 812, Wi	lton, CT 06897	
Check Box(es) that Apply:		Beneficial Owner	Executive Officer of the Managing Member	☐ Director of the Managing Member	General and/or Managing Partner
Full Name (Last name first, Auchincloss, John W.					
Business or Residence Add c/o Commonfund Asset M			Code) nbury Road, P.O. Box 812, Wi	lton, CT 06897	
Check Box(es) that Apply:		☐Beneficial Owner	☐ Executive Officer of the Managing Member	☐Director of the Managing Member	⊠Managing Member
Full Name (Last name first, Commonfund Asset Mana	gement Compa				
Business or Residence Addi 15 Old Danbury Road, P.O.			Code)		
Check Box(es) that Apply:		☐Beneficial Owner		☐Director of the Managing Member	General and/or Managing Partner
Full Name (Last name first, Sedlacek, Verne O.	ŕ				
Business or Residence Addic/o Commonfund Asset M			nbury Road, P.O. Box 812, Wi	lton, CT 06897	
Check Box(es) that Apply:	Promoter	☐Beneficial Owner	☐ Executive Officer of the Managing Member	☐Director of the Managing Member	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number an	d Street, City, State, Zip	(Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer of the Managing Member	Director of the Managing Member	General and/or Managing Partner
Full Name (Last name first,	if individual)		5	55	agiig i aisilei
Business or Residence Addi	ress (Number an	d Street, City, State, Zip	Code)		
	(Use bla	nk sheet, or copy and us	e additional copies of this sheet,	as necessary.)	

						B. INFO	RMATIO	N ABOU	T OFFER	RING					
1.	Has the	issuer sol	d, or does t	ne issuer in	tend to sell,	to non-acc	redited inve	estors in thi	s offering?					Yes	No
					A	Answer also	in Append	ix, Column	2, if filing	under ULO	E.				
2.	What is	the minin	num investr	nent that w	ill be accep	ted from an	y individua	ıl? *Subje	et to Mana	gement Di	scretion			\$ 1,000	,000*
3.	- -								Yes	No ⊠					
4.															
			rst, if indivi I rities, I r												
			ddress (Nu Wilton, C7		treet, City,	State, Zip C	Code)								
Name	of Asso	ciated Bro	ker or Deal	er											
States	in Whic	h Person L	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers								
(Check "	All States'	or check in	ndividual S	tates)						🗵	All States			
[AL] IL] MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	(DE) [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]		
	RI] ame (La	[SC] st name fir	[SD] rst, if indivi	[TN] dual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Busine	ess or Re	sidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
			ker or Deale												
States	in Whic	h Person I	isted Has S	folicited or	Intends to S	Solicit Purc	hasers								
												All States			
													(ID)		
<u>[</u>	AL] IL] MT] RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
			rst, if indivi			<u> </u>									
Busine	ess or Re	sidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name	of Assoc	ciated Bro	ker or Deal	er					<u></u>						
States	in Whic	h Person L	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers		 						
(Chec	k "All St	ates" or ch	neck individ	lual States)								All States			
[AL] IL] MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]		

[TX] [UT] [VT] [VA] [WA] [WV] [WI] (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	
l .	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 \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	T	Aggregate Offering	Amount Already
	Type of Security	Price	Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		1
	Convertible Securities (including warrants)		\$
	Partnership Interests	\$	\$
	Other (Specify <u>Limited Liability Company Interests</u>)	\$ 164,305,240	\$ 164,305,240
	Total	\$ 164,305,240	\$ 164,305,240
	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	31	\$ 164,305,240
	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, 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		s
	Rule 504		\$
	Total		\$
1 .	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		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 0
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		s
	Total	\square	5.0

4.		ering price given in response to Part C - Question 1 and to on 4.a. This difference is the "adjusted gross proceeds to t		\$ 164,305,240	
5.	the purposes shown. If the amount for any purpose	roceeds to the issuer used or proposed to be used for each se is not known, furnish an estimate and check the box to tred must equal the adjusted gross proceeds to the issuer set	he		
			Payments to Officers, Directors & Affiliates	Payments To Others	
	Salaries and fees		<u> </u>	□ \$	
	Purchase of real estate		<u> </u>	□ \$	
	Purchase, rental or leasing and installation of mac	hinery and equipment	<u> </u>	□ \$	
	Construction or leasing of plant buildings and fac	ilities	<u>s</u>	□ \$	
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset pursuant to a merger)	□ s	□ s		
	Repayment of indebtedness		s	□ \$	
	Working capital		🗆 \$	□ \$	
	Other (specify): Investment in portfolio securit	ies and related expenses	□ \$	☑ \$ 164,305,240	
	Column Totals		S	⊠ \$ 164,305,240	
	Total Payments Listed (column totals added)	× 16	⊠ \$ 164,305,240		
_		D. FEDERAL SIGNATURE			
ur		ne undersigned duly authorized person. If this notice is file rities and Exchange Commission, upon written request of i Rule 502.			
SSI	uer (Print or Type)	Signature	Date		
Co LL	mmonfund Institutional Core Equity Fund, C	John W. Audinbers	January 10, 2005		
	me of Signer (Print or Type) on W. Auchincloss	Title of Signer (Print or Type) Secretary of the Managing Member of the Issuer			

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

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

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