

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

SEC Mail Processing
Section

OMB APPROVAL
OMB Number: 3235-0076
Expires: March 15, 2009
Estimated average burden hours per response.....4.00



FORM D
NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION
MAR 16 2009
Washington, DC 110

Table with 3 columns and 3 rows, mostly empty.

Name of Offering () check if this is an amendment and name has changed, and indicate change.)
Pramerica Alpha Fixed Income Opportunity Fund (Cayman) SPC, Ltd. (Pramerica S&P 500 Beta Overlay Segregated Portfolio)

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

I. Enter the information requested about the issuer

Name of Issuer () check if this is an amendment and name has changed, and indicate change.)
Pramerica Alpha Fixed Income Opportunity Fund (Cayman) SPC, Ltd. (the "Fund")

Address of Executive Offices (Number and Street, City, State, Zip Code)
Registered office: c/o Walkers SPV Limited, Walker House, 87 Mary Street, Georgetown, Grand Cayman KY1-9002, Cayman Islands

Telephone Number (Including Area Code)
973 367 4779

Address of Principal Business Operations (Number and Street, City, State, Zip Code)
(if different from Executive Offices)

Telephone Number (Including Area Code)

Brief Description of Business

Investments through Pru Alpha Fixed Income Opportunity Master Fund I, L.P. (the "Master Fund")

Type of Business Organization

() corporation () limited partnership, already formed () other (please specify): exempted company
() business trust () limited partnership, to be formed

Actual or Estimated Date of Incorporation or Organization: Month 0 3 Year 0 8 () Actual () Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: F N)
CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Note: This is a special Temporary Form D (17CER 239,500I) that is available to be filed instead of Form D CER 239,500 only to issuers that file with the Commission a notice on Temporary Form D (17 CER 239,500I) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009.

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.
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.
Information Required: A new filing must contain all information requested.
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.

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.

Persons who 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.

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 and/or Managing Partner

Full Name (Last name first, if individual)
Saperstein, Steven B.

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Prudential Investment Management, Inc., Two Gateway Center, Third Floor, Newark, New Jersey 07102

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Cordrey, Peter

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Prudential Investment Management, Inc., Two Gateway Center, Third Floor, Newark, New Jersey 07102

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Pramerica Alpha Fixed Income Opportunity Fund (Cayman) SPC, Ltd. Star Trust

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Walkers SPV Limited, Walker House, 87 Mary Street, Georgetown, Grand Cayman KY1-9002, Cayman Islands

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Prudential Investment Management, Inc.

Business or Residence Address (Number and Street, City, State, Zip Code)
Two Gateway Center, Third Floor, Newark, New Jersey 07102

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

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

B. INFORMATION ABOUT OFFERING

Yes No

1. 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.

2. What is the minimum investment that will be accepted from any individual?\$5,000,000*

* Subject to the sole discretion of the Fund to accept lesser amounts but not less than \$100,000.

Yes No

3. Does the offering permit joint ownership of a single unit?

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. **Completed only with respect to sales in the U.S.**

Full Name (Last name first, if individual)

Prudential Investment Management Services LLC

Business or Residence Address (Number and Street, City, State, Zip Code)

Three Gateway Center, 14th Floor, Newark, NJ 07102-4077

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) 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] | [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 (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) 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] | [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 (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) 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] | [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 | \$2,000,000,000* _____ | \$75,000,000 _____ |
| <input checked="" type="checkbox"/> Common <input type="checkbox"/> Preferred | | |
| Convertible Securities (including warrants) | \$0 _____ | \$0 _____ |
| Partnership Interests | \$0 _____ | \$0 _____ |
| Other (Specify _____) | \$0 _____ | \$0 _____ |
| Total | \$2,000,000,000* _____ | \$75,000,000 _____ |

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."

| | Number Investors | Aggregate Dollar Amount of Purchases |
|--|------------------|--------------------------------------|
| Accredited Investors | 1 | \$75,000,000 _____ |
| Non-accredited Investors | 0 | \$0 _____ |
| 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 Security | Dollar Amount Sold |
|------------------------|------------------|--------------------|
| Type of offering | _____ | \$ _____ |
| Rule 505 | _____ | \$ _____ |
| Regulation A | _____ | \$ _____ |
| Rule 504 | _____ | \$ _____ |
| Total | _____ | \$ _____ |

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 | <input checked="" type="checkbox"/> \$0 _____ |
| Printing and Engraving Costs | <input checked="" type="checkbox"/> \$0 _____ |
| Legal Fees | <input checked="" type="checkbox"/> \$360,000** _____ |
| Accounting Fees | <input checked="" type="checkbox"/> \$0 _____ |
| Engineering Fees | <input checked="" type="checkbox"/> \$0 _____ |
| Sales Commissions (specify finders' fees separately) | <input checked="" type="checkbox"/> \$0** _____ |
| Other Expenses (identify) | <input checked="" type="checkbox"/> \$0 _____ |
| Total | <input checked="" type="checkbox"/> \$360,000** _____ |

* Together with other feeder funds; the Fund may accept additional amounts. / ** Estimate of aggregate legal fees for the organization of and offering of interests in the Fund, other feeder funds and the Master Fund. The Fund will not bear any placement or solicitation fees in connection with the offering of its shares.

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

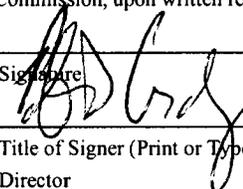
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." \$1,999,640,000*

5. 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 | \$ _____ | \$ _____ |
| Purchase of real estate | \$ _____ | \$ _____ |
| Purchase, rental or leasing and installation of machinery and equipment | \$ _____ | \$ _____ |
| 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 or securities of another issuer pursuant to a merger) | \$ _____ | \$ _____ |
| Repayment of indebtedness | \$ _____ | \$ _____ |
| Working capital | \$ _____ | \$ _____ |
| Other (specify): Investments through the Master Fund, and related costs | ■ \$1,999,640,000* | \$ _____ |
| | \$ _____ | \$ _____ |
| Column Totals | ■ \$1,999,640,000* | \$ _____ |
| Total Payments Listed (columns totals added)..... | ■ \$1,999,640,000 *- | |

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) Pramerica Alpha Fixed Income Opportunity Fund (Cayman) SPC, Ltd. | Signature  | Date 3/10/09 |
| Name of Signer (Print or Type) Peter Cordrey | Title of Signer (Print or Type) Director | |

* Together with other feeder funds.

ATTENTION

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