FOXBY CORP Form 3 September 12, 2005 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and A Person <u>*</u> Ramirez		eporting	2. Date of Event RequiringStatement(Month/Day/Year)	3. Issuer Nan FOXBY C	ng Symbol				
(Last)	(First)	(Middle)	08/31/2005	4. Relationship of Reporting Person(s) to Issuer(Check all applicable)			5. If Amendment, Date Original Filed(Month/Day/Year)		
11 HANOV	ER SQUA	RE, 12TH							
FLOOR	-								
(Street) NEW YORK, NY 10005				Director10% Owner XOfficerOther (give title below) (specify below)		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting			
			Chief Compliance Offic			er	Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - N	Table I - Non-Derivative Securities Beneficially Owned					
1.Title of Secu (Instr. 4)	rity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.			
Reminder: Rep owned directly	-		ch class of securities benefic	ially S	SEC 1473 (7-02)			
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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date		Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I)	

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Ramirez John F 11 HANOVER SQUARE, 12TH FLOOR NEW YORK, NY 10005	Â	Â	Chief Compliance Officer	Â			
Signatures							
John F. Ramirez, Chief Compliance Officer		2/2005					
**Signature of Reporting Person		Date					
Evaluation of Reconcest							

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. 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 number.