FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Clark Chad			2. Date of E (Month/Day/ 10/02/2020	Year)	ent Requiring Statement ear)	3. Issuer Name and Ticker or Trading Symbol CPG Cooper Square International Equity, LLC [N/A]					
						4. Relationship of Reporting Person(s) to Issuer			If Amendment, Date of Original Filed (Month/Day/Year)		
(Last) 380 LAFAYETTE STF	(First) REET, 6TH FLOOR	(Middle)				(Check all applicable) Director Officer (give title below) X	10% Owner Other (specify b		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(Street)						Portfolio Manager	er -				
NEW YORK	NY	10003									
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)						3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) 4. Nature of Indirect Beneficial Ownership (Instr. 5)			ial Ownership (Instr. 5)		
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)		ite	(Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisab		Expiration Date	Title	Amount or Number of Shares	nber of			

Explanation of Responses:

No securities are beneficially owned.

/s/ Chad Clark

10/02/2020

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

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 Number.

^{*} 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).