## FORM D



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

OMB Number:

3235-0076

Expires:

March 31, 1991

Estimated average burden hours per response

... 16.00

## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix			Serial			
Đ	ATE RE	CEIVED	)			

NI		12 12 4 1	V 1813.4	13. 14		
Name of Offering ( check if this is an amendment and name has changed, and indicate change.) 1st Metropolitan Mortgage Co.  Filing Under (Check box(es) that apply):						
□Rule 504 □Rule 505	☑Rule 506 ☐Section 4(6)	□ULOE	<del></del>	rilling Onder (Check	box(es) mat apply):	
Type of Filing: New Fi		LOLOE				
Type of Filling. New Fi	A. BASIC IDENT	TEICATION	) A T A			
1. Enter the information requested abo		IFICATION L	DAIA			
		· 1	\1St x f .	The Market Co.		
Name of issuer ( $\square$ check it this is an a	amendment and name has changed, and	indicate change	e.)1 · Metrop	ontan Mortgage Co.		
A 11 CM (1 OCC OT 1	10: 0: 0: 17: 0: 1	204431 0	1 7 1		L. A. C. L. 1252 000	
	per and Street, City, State and Zip Code	3044 N. Centr			ling Area Code)773-889-	
Avenue, Chicago, Illinois 60634			544			
	tions (Number and Street, City, State ar	id Zip Code) (if	Tele	ephone Number (includ	ling Area Code) SAME	
different from Executive Offices)SA						
Brief Description of Business Morta	gage, Brokerage and Banking Company				<del></del>	
Type of Business Organization					DOCCECCE	
🗷 corporation	☐ limited partnership, already form	ied			PROCESSED	
•			□ other (ple	ease specify)		
☐ business trust	☐ limited partnership, to be formed	l	•	• • •	APR 2 5 2002	
	Month	Year	-		HLK 7 7 FOOT	
Actual or Estimated Date of Incorpora	tion or Organization: 6	98	Actual	□ Estimated	THOMSON	
<b>F</b> - · · ·	<u> </u>					
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: IL						
surfaction of meorporation of Organ	•					
	CN for Canada; FN for other for	reign jurisaictio	<u>nj</u>			

#### -GENERAL INSTRUCTIONS

#### 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.

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 photocopies of the manually signed. Any 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 form 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 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 on an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATE								
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 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) Mellul, Elie								
Business or Residence Address (Number and Street, City, State, Zip Code) c/o 1 <sup>st</sup> Metropolitan Mortgage Co., 3044 N. Central Avenue, Chicago, Illinois 60634								
Check Box(es) that Apply: □Promoter □Beneficial Owner ☑Executive Officer ☑Director □General and/or Managing Partner								
Full Name (Last name first, if individual) Mellul, Jacob,								
Business or Residence Address (Number and Street, City, State, Zip Code) 1 <sup>st</sup> Metropolitan Mortgage Co., 3044 N. Central Avenue, Chicago, Illinois 60634								
Check Box(es) that Apply: □Promoter ☑Beneficial Owner ☑Executive Officer □General and/or Managing Partner								
Full Name (Last name first, if individual Meland, Terry E.								
Business or Residence Address (Number and Street, City, State, Zip Code) 1st Metropolitan Mortgage Co., 3044 N. Central Avenue, Chicago, Illinois 60634								
Check Box(es) that Apply: ☐Promoter ☐Beneficial Owner ☑Executive Officer ☐Director ☐General and/or Managing Partner								
Full Name (Last name first, if individual) Warren, William D.								
Business or Residence Address (Number and Street, City, State, Zip Code) 1st Metropolitan Mortgage Co., 3044 N. Central Avenue, Chicago, Illinois 60634								
Check Box(es) that Apply: □Promoter □Beneficial Owner ☑Executive Officer ☑Director □General and/or Managing Partner								
Full Name (Last name first, if individual)LaCroix, Richard R.								
Business or Residence Address (Number and Street, City, State, Zip Code) 1 <sup>st</sup> Metropolitan Mortgage Co., 3044 N. Central Avenue, Chicago, Illinois 60634								
Check Box(es) that Apply:								
Full Name (Last name first, if individual) 1st Metro Corp.								
Business or Residence Address (Number and Street, City, State, Zip Code) 1st Metropolitan Mortgage Co., 3044 N. Central Avenue, Chicago, Illinois 60634								
Check Box(es) that Apply:     Promoter   Beneficial Owner   XExecutive Officer   Director   General and/or Managing Partner								
McKinzie, Trevor								
Business or Residence Address (Number and Street, City, State, Zip Code)c/o !st Metropolitan Mortgage Corp.3044 N Central, Chicago ILL								
Check Box(es) that Apply:								

Business or Residence Address (Number and Street, City, State, Zip Code)1st Metropolitan Mortgage Corp, 3044 N. Central Ave. Chicago ILL (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Full Name (Last name first, if individual)

				В.	INFORMA	IION ABO	UI OFFER	ang				
1. Ha	s the issuer s	old, or does	the issuer int	tend to sell, t	o non-accreo	dited investo	rs in this off	ering?				Yes No □ ⊠
				Answer al	so in Append	dix, Column	2, if filing u	nder ULOE				
2. Wi	What is the minimum investment that will be accepted from any individual?								Fra	ctional Share and/or Units		
3. Do	· · · · · · · · · · · · · · · · · · ·									Yes No ⊠ □		
4. I remuner a broker associate	Enter the infection for solid or dealer regarded persons of	ormation recitation of projected with such a brok	quested for urchasers in the SEC an er or dealer,	each persor connection d/or with a s	n who has b with sales of state or states	een or will securities in , list the nar	be paid or the offering ne of the bro	given, dire g. If a person bker or deale	ctly or indi to be listed r. If more tl	rectly, any o	commission ated person	or similar or agent of
Full Nai	ne (Last nam	ie first, if ind	lividual)									
Busines	s or Residence	ce Address (	Number and	Street, City	, State, Zip (	Code)						
Name of	Associated	Broker or De	ealer									
States in	Which Pers	on Listed Ha	s Solicited o	or Intends to	Solicit Purcl	nasers					****	
(Check '	'All States" o	or check indi	vidual States	s)	***************************************		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				•••••	☐ 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 Nar	ne (Last nam	e first, if ind	ividual)									
Business	or Residence	e Address (	Number and	Street, City	, State, Zip C	Code)						
Name of	Associated	Broker or De	ealer									
States in	Which Perso	on Listed Ha	s Solicited o	or Intende to	Solicit Purch	acerc						
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Full Nar	ne (Last nam	e first, if ind	ividual)									
Business	or Residenc	e Address (i	Number and	Street, City	, State, Zip C	Code)						
Name of	Associated	Broker or De	ealer					· · · · · · · · · · · · · · · · · · ·				
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(Check '	All States" o	r check indiv [AZ]	vidual States [AR]	s) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	☐ All States [ID]
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[MT]	[NE]	[IA] [NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
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$[i\alpha]$	[3C]	പ്രവ	[114]	[IA]	ردي	[vi]	[ * /1]	[ 44 7.7]	[ ** * ]	[ 44.1]	[ 44 ]	[1.17]

(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 Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "O" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and 1. already exchanged. Type of Security Aggregate Amount Already Offering Price Sold .....\$ Debt Equity ☐ Common ☐ Preferred Convertible Securities (including warrants).....\$\_\_\_ Partnership Interests ....... Other (Specify 250,000, 5.25% Cumulative Convertible Preferred Shares )......\$2,500,000 \$\$2,500,0000-At \$10.00 per share. Each Share convertible into 2 shares of common stock Total \$2,500,000\_\_\_\_ \$2,500,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and no-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of this 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." 2. Aggregate Dollar Amount Number of Purchasers Investors \$2,500,000 Non-accredited Investors....\_\_\_\_ Answer also in Appendix, Column 3, if filing under ULOE. 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. 3. Type of Dollar Amount Security Type of Offering Sold Rule 505 . .... Regulation A Rule 504 ..... Total ..... 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 know, furnish an estimate and check the box to the left of the estimate. 4.

Engineering Fees.

Sales Commissions (specify finders' fees separately).

\$\sigma\$ \$\square\$

...... □ \$

Other Expenses (identify)

			E. STATE SIGNATURE	
2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notion Form D (17 CFR 239.500) at such times as required by state law.  3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished to the issuer to offerees.  4. The undersigned issuer represents, that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.  The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duauthorized person.  Issuer (Print or Type)1st Metropolitan Mortgage Signature Date		1.		-
on Form D (17 CFR 239.500) at such times as required by state law.  3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished to the issuer to offerees.  4. The undersigned issuer represents, that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.  The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duauthorized person.  Issuer (Print or Type)1st Metropolitan Mortgage   Signature   Date   Dat			See Appendix, Column 5, for state response	
the issuer to offerees.  4. The undersigned issuer represents, that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.  The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duauthorized person.  Issuer (Print or Type)1st Metropolitan Mortgage   Signature   Date		2.		notice
Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claimir the availability of this exemption has the burden of establishing that these conditions have been satisfied.  The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned du authorized person.  Issuer (Print or Type)1 <sup>st</sup> Metropolitan Mortgage   Signature   Date   Date		3.		ied by
Issuer (Print or Type)1st Metropolitan Mortgage   Signature   Date / /		4.	Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer cla	to the
			otification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned	l đuly
(N°( 10()( N) \		it or Type)1 <sup>st</sup>	9M M/W/ 4/2/02	
Name of Signer (Print or Type) Elie Mellul  Title of Signer (Print or Type) Chairman	Name of Si	gner (Print or	Type) Elie Mellul  Title of Signer (Print or Type) Challenan	

	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 a Part C - Question 4.1. This difference is the "adjusted gross proceeds to the issuer."	nd total expenses furr	nished in response to
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for effor any purpose is not known, furnish an estimate and check the box to the left of the estimate. The to adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.	ach of the purposes slotal of the payments i	nown. If the amount listed must equal the
		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	D \$	_ 🗆 \$
	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)		D \$
			_ 🗆 \$
	Column Totals		_ \$
	Total Payments Listed (column totals added)	□ \$ <u>.</u>	
	D. FEDERAL SIGNATURE	<del></del>	
consti	ssuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is file tutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon with hed by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	d under Rule 505, the oitten request of its s	e following signature taff, the information
Issue	er (Print or Type) I <sup>st</sup> Metropolitan Mortgage Co.  Signature  Date	42/02	
NI	og of Signer (Print or Type) Flie Mollyl Title of Signer (Print or Type) Chairman	' /	

ATTENTION

Name of Signer (Print or Type) Elie Mellul