FORM D UNITED STATES OMB Number: 3235-0076 SECURITIES AND EXCHANGE COMMISSION Expires: May 31, 2002 Washington, D.C. 20549 RECEIVED Estimated average burden hours per response16.00 FORM D SEC USE ONLY 2003 NOTICE OF SALE OF SECURITIES r Prefix Serial PURSUANT TO REGULATION D กรถ56385 SECTION 4(6), AND/OR DATE RECEIVED UNIFORM LIMITED OFFERING EXEMPTION (check if this is an amendment and name has changed and indicate change.) High Distribution Limited Partner Units of Cantor Fitzgerald, L.P. 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.) Cantor Fitzgerald, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 135 East 57th Street, New York, New York 10022 (212) 938-5000 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 Holding company for financial service and brokerage companies. APR 22 2003 Type of Business Organization THOMSON corporation limited partnership, already formed ☐ other (please specify): FINANCIAL business trust ☐ limited partnership, to be formed Year Month Actual or Estimated Date of Incorporation or Organization: \[0 9 Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction GENERAL INSTRUCTIONS ederal: tho 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 J.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 nd 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 n which it is due, on the date it was mailed by United States registered or certified mail to that address. 'here to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. opies 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 photocopies of the manually signed copy or bear typed or printed signatures. formation Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any anges 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 pendix need not be filed with the SEC. 'ing Fee: There is no federal filing fee.

ATTENTION

displays a currently valid OMB control number.

ilure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the propriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the ing of a federal notice.

is notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted OE 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 e, 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 ompany 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

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ice and must be completed.

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	□ Director	General Partner and/or Managing Partner
Full Name (Last name first, if individual) CF Group Management, Inc.		
Business or Residence Address (Number and Street, City State, Zip Code) 135 East 57th Street, New York, New York 10022		
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☑ Executive Officer	☑ Director	General Partner and/or Managing Partner
Full Name (Last name first, if individual) Lutnick, Howard W.		
Business or Residence Address (Number and Street, City State, Zip Code) 135 East 57th Street, New York, New York 10022		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer	☐ Director	General Partner and/or Managing Partner
Full Name (Last name first, if individual) Merkel, Stephen		
Business or Residence Address (Number and Street, City State, Zip Code) 135 East 57th Street, New York, New York 10022		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner 🗷 Executive Officer	☑ Director	General Partner and/or Managing Partner
Full Name (Last name first, if individual) Fraser, Stuart		
Business or Residence Address (Number and Street, City State, Zip Code) 135 East 57th Street, New York, New York 10022		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer	☐ Director	General Partner and/or Managing Partner
Full Name (Last name first, if individual) Amaitis, Lee		
Business or Residence Address (Number and Street, City State, Zip Code) 135 East 57th Street, New York, New York 10022		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer	☐ Director	General Partner 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 Partner 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. INI	FORMAT	ION ABO	OUT OFF	ERING				
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.										Yes □	No 🗷	
2. What is th	ne minimum	investment	that will be	accepted fro	om any indiv	idual?			9	§	0	
3. Does the4. Enter th			-		s been or wi					Yes □	No 🗷	
commiss offering. with a st	sion or simi If a person ate or states	ar remuner to be listed i list the nan	ation for solis an association of the bro	licitation of ted person o ker or deale	purchasers r agent of a b r. If more th information	in connection roker or dea nan five (5)	on with sale ler registere persons to b	es of securit d with the SI e listed are a	ies in the EC and/or			
Full Name (I	Last name f	irst, if indiv	vidual)									
Business or I	Residence A	Address (N	umber and	Street, City	, State, Zip	Code)				•		
Name of Ass	sociated Bro	ker or Dea	ller									
States in Wh	ich Person	Listed Has	Solicited o	r Intends to	Solicit Pu	rchasers						
(Check "A	All States" o	or check inc	dividual Sta	ites)								~ 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 (I	ast name f	irst, if indiv	vidual)			-						
Business or I	Residence A	Address (N	umber and	Street, City	, State, Zip	Code)						
Name of Ass	ociated Bro	ker or Dea	ler									•
States in Wh	ich Person	Listed Has	Solicited o	r Intends to	Solicit Pur	chasers		· · · · · ·				
(Check "A	All States" o	or check inc	dividual Sta	ites)								~ 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] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full Name (I				[IX]	[01]	[* 1]	[VA]		[44.4]	[441]	[14.1]	[I K]
Business or I	Residence A	Address (N	umber and	Street, City	, State, Zip	Code)	'					
Name of Ass	ociated Bro	ker or Dea	ler			· · · · · ·					<u></u>	
States in Wh				r Intends to	Solicit Du	chasers						
						CHASCIS						. 11 0
(Check "A	All States" o [AK]	or check ind [AZ]	dividual Sta [AR]	tes) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	~ All States [ID]
[IL]	[N]	[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 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. Aggregate Amount Already Type of Security Offering Price Sold Debt..... Equity □ Common □ Preferred Convertible Securities (including warrants)..... \$ 20,987,119 Partnership Interests \$ 55,152,118).,.... Other (Specify: ____ \$_55,152,118 \$ 20,987,119 Total Answer also in Appendix, Column 3, if filing under ULOE, 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 A0≅ if answer is "none" or "zero." Aggregate Number of Dollar Amount Investors of Purchases \$ 20,987,119 Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, 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. Type of Dollar Amount Type of offering Not Applicable Security 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

	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C - Q proceeds to the issuer."	uestion 4.a. This difference is the "adjus	sted gross	\$ <u>55,014,118</u>
5.	Indicate below the amount of the adjusted gross proce each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C.	purpose is not known, furnish an estine payments listed must equal the adjus	mate and	·
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		□ \$	_ 🗆 \$
	Purchase of real estate		□ \$	_ 🗆 \$
	Purchase, rental or leasing and installation of m	D \$		
	Construction or leasing of plant buildings and f	acilities	D \$	_ 🗆 \$
	Acquisition of other businesses (including the voifering that may be used in exchange for the acquirement to a merger)	ssets or securities of another issuer	S	□ \$
	Repayment of indebtedness		□ \$	_ \$
	Working capital		□ \$	_ 🗆 \$
	Other (specify): Replace paid-out capital			⊠ \$ <u>55,014,118</u>
	Column Totals		🗆 \$	D \$
	Total Payments Listed (column totals added)			≥ \$ 55,014,118
		D. EEDER AT CLOWATURE		***************************************
		D. FEDERAL SIGNATURE		
gna	ssuer has duly caused this notice to be signed by the u ture constitutes an undertaking by the issuer to furnish nation furnished by the issuer to any non-accredited in	to the U.S. Securities and Exchange evestor pursuant to paragraph (b)(2) of	Commission, upon writte	en request of its staff, the
	(Print or Type) FOR FITZGERALD, L.P.	Signature Topher Men	hl	Date
me	of Signer (Print or Type)	Title of Signer (Print or Type)		1 11.21.2
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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)