

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

FORM D

SECTION 4(6) AND/OD



Estimated average burden hours per response 16.00

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DATE RECEIVED						
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	SECTION 4(0), AND/OR	DATE RECEIVED
*UNIFORM I	LIMITED OFFERING EXEM	PHON
Name of Offering (check if this is an amendment an	nd name has changed, and indicate change.)	1206521
MSL Management, LLC October 2002 Class B Offering		
Filing Under (Check box(es) that apply): Rule 504 Type of Filing: New Filing Amendment	Rule 505 Rule 506 Section 4(6)	☐ ULOE
	A BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment and o	same has changed, and indicate change.)	
MSL Management, LLC	·	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1000 Washington Avenue, Suite 117, St. Louis, MO 63101		1-800-901-1947
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
arranging and promoting sports business programs		olease specify): Nability company
Type of Business Organization		
	thership, already formed 🔀 other (p	olease specify):
		liability company
A series of the	Month Year	
Actual or Estimated Date of Incorporation or Organization Jurisdiction of Incorporation or Organization: (Enter two-		nated
	anada; FN for other forcign jurisdiction)	<u>mo</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 ct seq. or 15 U.S.C.

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 or 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 Regulred: 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 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 from 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 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 of an available state exemption unless such exemption is prodicated on the filling of a federal notice.

SEC 1972 (6-02)

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.

1 of 9

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2. Enter the information req	uested for the follow	wing;			
Each promoter of the control of	he issuer, if the issu	uer has been organized v	vithin the past five years;		
					a class of equity securities of the issu
			of corporate general and	managing partners	of parenership issuers; and
 Each general and n 	aanaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Garrity, Shawn Full Name (Last name first, i	•				
1165 Hampton Park Drive, St. Business or Rosidence Addr		Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Cioffi, Gary Full Name (Last name first, i	findividual)				
21 Serenite Lane, Muttontown	•				
Business or Residence Addre		Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Rosenberg, Lawrence Full Name (Last name first, i	f individual)				
100 Valley Road, New Canain					
Business or Residence Addre		treet, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Lust name first, is	f individual)				
Business or Residence Addre	ess (Number and S	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	findividual)				
Business or Residence Addre	css (Number and S	treet, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and S	breet, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and S	Street, City, State, Zip C	ode)		
	(Use blan	nk sheet, or copy and use	additional copies of this sl	beet, as necessary)	

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1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes X	No				
Answer also in Appendix, Column 2, if filing under ULOE.													
2. What is the minimum investment that will be accepted from any individual?									\$ 15,000.00				
3.	Does th	e offering	permit join	t ownershi	p of a sing	le unit?	41414				.,,,,,,,,	Yes ⊠	No.
4.										,	_		
Ful	l Name (Last name	first, if indi	ividual)									
100		Pacidenas	Address (N		State Cit	m. Casa 7	'- C-1-\					_	
ьų:	Siueza Ot	Kesidenec	Address (N	umber and	Street, Ci	ty, State, 2	ap Coac)						
Na	me of Asi	sociated Br	roker or De	aler	***		•						
Sta	tes in Wh	nich Person	Listed Has	Solicited	or latends	to Salicit I	Purchasers		<u> </u>				
	(Check	"All States	or check	individual :	States)					•••••		. 🔲 🗚	States
	AL IL MT RI	IN NE SC	IA NV SD	AR KS NH TN	KY NJ TX	LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA
Ful	Name (Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	lumber and	l Street, Ci	ity, State, 2	Zip Code)						
Na	me of As	sociated Bi	roker or De	alcr				<u></u>					
Sta	tes in Wi	ich Persor	Listed Ha	Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	s" or check	individual	States)		********					☐ Al	States
	IL MT RI	IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)		-							
80	siness or	Residence	Address (N	Jumber and	l Street, Ci	ity, State, 2	Zip Code)						
Na	me of As	sociated B	roker or De	aler									
Sta	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State	s" or check	individual	States)				•. • . • • • • • • • • • • • • • • • •	••••	;	At	1 States
	IL MT RI	IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	LA NM UT	ME NY VI	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA

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

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the 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 Scounty	Aggregate Offering Price	Amount Already Sold
Debt	s0.00	\$0.00
Equity	\$0.00	s 0.00
Common Preferred		
Convertible Securities (including warrants)	s0.00	s 0.00
Partnership Interests	\$ <u>0.</u> 00	s 0.00
Other (Specify Class B Units in an LLC)	s 750,000.00	\$ 550,000.00
Total		\$ 550,000.00
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 "0" if answer is "none" or "zero."		Aggregute
	Number Investors	Dollar Amoun
Accredited Investors		22
Non-accredited Investors	0	50.00
Total (for filings under Rule 504 only)	13	\$550.000.0
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 accurities by type listed in Part C — Question 1.		
Type of Offering	Type of Security	Dollar Amoun Sold
Rule 505	0	\$0.00
Rogulation A	0	s0.00
Rule 504	Class B LLC Units	\$ 550,000.00
Total		\$ 550,000.00
a. Purnish 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 insurer. 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.		\$ 0.00
		\$ 0.00
not known, furnish an estimate and check the box to the left of the estimate.		
not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees		\$ 10,000.00
not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Pees Printing and Engraving Costs	\S	
Transfer Agent's Fees Printing and Engraving Costs Legal Fees	3	\$ 0.00
not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees		\$ 0.00 \$ 0.00
not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Pees Printing and Engraving Costs Legal Fees Accounting Fees		\$ 0.00

Unit Holders, in the discretion of the Manager of the Issuer, may be required to loan funds to the Issuer in an amount equal to the Purchase Price paid for the Class B Units by the

	C.OFFERING PRICE NUME	ER OF INVESTORS, EXPENSES AND I	SE OFFRO	CEEDS		
and total expense	furnished in response to Part C-C	ng price given in response to Part C—Question 4.a. This difference is the "adjust	ed gross		s	740,000.00
each of the purp check the box to	ses shown. If the amount for any	seed to the issuer used or proposed to be purpose is not known, furnish an estimate payments listed must equal the adjusts C—Question 4.b above.	ate and			
				Payments to		
				Officers,		_
				Directors, & Affiliates		Payments to Others
Salaries and feet					Ω.	
					⊠ \$.	50,000.00
				0.00	∐5_	0.00
	or leasing and installation of mach	inery		0.00	⊠s	5,000.00
		lities	-			0.00
	her businesses (including the valu			0.00	□ ⁴.	0.00
offering that may	be used in exchange for the asset	s or securities of another				
			_			0.00
			_			0.00
Working capital			🔲 s	0.00	⊠ \$.	685,000.00
Other (specify):			_ 🗆 🗆 5	0.00		0.00
			_ ~			
			···· 🗀 s		□ \$	
Calumn Table			_			T. T. C. C. C. C.
Column Totals				0.00		740,000.00
Total Payments	isted (column totals added)	· · · · · · · · · · · · · · · · · · ·		☐ s	740,00	0.00
		D. FEDERAL SIGNATURE // TA		NAME OF THE PARTY	Thirty.	246.57754
signature constitutes	n undertaking by the issuer to furn	undersigned duly authorized person. If the ish to the U.S. Securities and Exchange	Commission	n, upon writter		
use information numi	ned by the issuer to any non-accre	edited investor pursuant to paragraph (b	of Rule	502.		
Issuer (Print or Type)		Signature	Dat	· _/_/	/	}
MSL Management, LLC				5/8/	<u>つる</u>	
Name of Signer (Prin	or Type)	Title of Signer (Print or Type)				
Shawn Garrity		Manager				
		- ATTENTION				
Intentiona	misstatements or omissions	of fact constitute federal criminal v	iolations.	(See 18 U.S.	C. 190)1.)