FORM D

SEC 1972 (6-02) 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 control number

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 predicated on the filing of a federal notice.



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

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

Name of Offering (check if this is an amendment and name has changed, and indicate change,)

OMB AP	PROVAL				
OMB Number: Expires: May 31, 2005 Estimated average burder hours per response1	3235-0076		FCFIV	ED CO	_
SEC II	SE ONLY	्र 1	1 1 1 1 1 1	-12 100	
Prefix	Serial	JUL	2 3	2004	
DATE	RECEIVED	1			
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		1.0%	- 7Q		,

NYFIX, Inc. – Renaissance Purchase	g Se
Filing Under (check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment	ĈE
A. BASIC IDENTIFICATION DATA JUL 2	<u>.</u> 7
1. Enter the information requested about the issuer	
THO.	NSO
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	VCL
NYFIX, Inc.	_
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)	
Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902 (203) 425-8000	
Address of Principal Business (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Operations	-
(if different from Executive Offices)	_
Brief Description of Business Electronic trading infrastructure and applications.	_
Type of Business Organization	_
☐ corporation ☐ limited partnership, already formed ☐ other (please specify): Limited Liability ☐ business trust ☐ limited partnership, to be formed ☐ Company	_
Actual or Estimated Date of Incorporation or Organization: Month Year	
Actual 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

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 copy or bear typed or printed signatures.

Information Required: A new filing must contain all information required, Amendments need only report the name of the issuer and offering, any changes therete, 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.

A. BASIC IDENTIFICATION DATA 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 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 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or
Managing Partner
Full Name (Last name first, if individual) Hansen, Peter K.
Business or Residence Address (Number and Street, City, State, Zip Code)
Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
Managing Partner
Full Name (Last name first, if individual) Dechan, George O.
Business or Residence Address (Number and Street, City, State, Zip Code)
Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
Managing Partner
Full Name (Last name first, if individual) Lynch, William J.
Business or Residence Address (Number and Street, City, State, Zip Code)
Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
Managing Partner
Full Name (Last name first, if individual) Warden, Carl E.
Business or Residence Address (Number and Street, City, State, Zip Code)
Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Gasser, Robert C.
Business or Residence Address (Number and Street, City, State, Zip Code)
Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Kragh, Lars Business or Residence Address (Number and Street, City, State, Zip Code)
Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Hahn, Mark Business or Residence Address (Number and Street, City, State, Zip Code)
Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Pertner
Full Name (Last name first, if individual)
Bellardo, Brian Business or Residence Address (Number and Street, City, State, Zip Code)
Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Jennings, William C.
Business or Residence Address (Number and Street, City, State, Zip Code)
Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or
Full Name (Last name first, if individual)
Jamaitis, Keith R.
Business or Residence Address (Number and Street, City, State, Zip Code) Stamford Harbor Park, 333 Ludlow Street, Stamford, Connecticut 06902
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?											
2.	Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual? Yes No											
3.												
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.											
	Name (Last na											
Bus	ness or Resider	nce Address	s (Number a	and Street,	City, State,	Zip Code)						
Nan	te of Associate	d Broker or	Dealer									
	es in Which Per eck "All States"											☐ All States
[AL [IL] [M] [R]	[IN]] [NE]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	(ID) (MO) (PA) (PR)
Full	Name (Last na	me first, if	individual)									
Bus	iness or Reside	nce Addres	s (Number a	and Street,	City, State,	Zip Code)						
Nan	ne of Associate	d Broker or	Dealer									
	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)											
[AL [IL] [M] [RI]	[IN] [NE]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

B. INFORMATION OFFERING

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

l.	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND I 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.	USE OF PROCEEDS	
	Type of Security Debt	Aggregate Offering Price S	Amount <u>Afready Sold</u> \$
	Equity	\$_2,237,008.70	The Company has issued 427,172 shares of NYFIX, Inc. common stock in payment of \$2,237.008.70 in promissory notes. The Company previously filed a Form D in October, 2003 relating to the issuance of such promissory notes.
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	<u>\$</u>	<u>s</u>
	Partnership Interests	\$	<u>s</u>
	Other (Specify)	\$	\$
	Total	\$ <u>2,237,008.70</u>	S see above
	Answer also in Appendix, Column 3, if filing under ULOE		
	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."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		
		<u>- 8</u>	\$ <u>2.154.350.74</u>
	Non-accredited Investors		<u>\$82,657.96</u>
	Total (for filings under Rule 504 only)		\$
3.	Answer also in Appendix, Column 4, if filing under ULOB. 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		- 11
	Type of offering	Type of	Dollar Amount
		Security	Sold
	Rule 505		<u> </u>
	Regulation A		3
	Rule 504		\$
	Total		\$
4.	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 known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		∐ ፮
	Printing and Engraving Costs		¥ §
	Legal Fees		ዟ ፮
	Accounting Fees		S
	Engincering Fees		
	Sales Commissions (specify finders' fees separately)		□ \$
	Other Expenses (identify)		□ §

C. OFFERING PRICE, NUM	MBER OF INVESTORS, EXPENSES	AND	USE OF PRO	CEEDS		
 b. Enter the difference between the agg Question 1 and total expenses furnishe difference is the "adjusted gross proceed 	regate offering price given in response to part C d in response to Part C - Question 4.a. This s to the issuer."		000 01 110	\$_2,237,008.70		
 Indicate below the amount of the adjuste to be used for each of the purposes show furnish an estimate and check the box to payments listed must equal the adjusted to Part C - Question 4.b above. 						
		Ĺ	Payments to Officers, Directors & Affiliates	Payments to Others		
Salaries and Fees			□ \$			
				□ \$		
Purchase, rental or leasing and installation	on of machinery and equipment			□ \$		
Construction or leasing of plant building	s and facilities	□ S		□ s		
pursuant to a merger)	ng the value of securities involved in this or the assets or securities of another issuer			S2.237.008,70 □ S		
Working capital	***************************************	☐ \$	5	5		
Other (specify)			<u> </u>			
		□ 8)	□ \$		
Total Payments Listed (column totals ad	ded)					
	D. FEDERAL SIGNATURE					
under rule 505, the following signature	to be signed by the undersigned duly auth constitutes an undertaking by the issuer equest of its staff, the information furnish Rule 502.	to fur	nish to the U.S.	Securities and		
Issuer (Print or Type)	Issuer (Print or Type) Signature					
NYFIX, Inc.	July	y 22, 2004				
Name of Signer (Print or Type)	Title of Signer (Print or Type)					
Brian Bellardo	Secretary					
Intentional misstatements or	ATTENTION romissions of fact constitute federal criminal viola	tions.	(Sec 18 U.S.C. 100	1.)		

		E. STATE SIGNATURE			
1.		0.262 presently subject to any of the disquali		Yes	N₀ ⊠
		See Appendix, Column 5, for state respon	se.	_	E-13
2.	The undersigned issuer hereby unde (17 CFR 239.500) at such times as r	rtakes to furnish to any state administrator of equired by state law.	any state in which this notice is file	d, a notice o	n Form
3.	The undersigned issuer hereby unde offerees.	rtakes to furnish to the state administrators, u	pon written request, information fun	nished by th	ie issuei
4.	Offering Exemption (ULOE) of the exemption has the burden of establis	at the issuer is familiar with the conditions the state in which this notice is filed and undersushing that these conditions have been satisfied the contents to be true and has duly caused the	ands that the issuer claiming the avai i.	ilability of t	
	ned duly authorized person.	the contents to be time and ties only caused in	is notice to be signed on its behalf b	y uic	
Issuer (Pr	int or Type)	Signature	Date		
NYFIX	•• •	Brin Bellach	July 22, 2004		
	int or Type)	Title (Print or Type)			
Brian Bel	lardo	Secretary			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend non acc	to sell to credited s in State Item I)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Disquall under ULOE atts explana waiver g (Part E	fication State (If yes, ach ation of granted) — Item			
State	Yes	No	Exchange of Stock for Membership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL	 								
AK	 								
AZ									
AR									
CA									
СО									
CT									
DE									
DC									
FL									
GA									
HI									
ID									
iL									
IN									
lA									ļ
KS								<u></u>	<u> </u>
KY									<u> </u>
LA									ļ
ME									
MD									
MA									
MI									
MN									
MS									
MO									

APPENDIX

1		2	3 '		4			5	;	
	non ac	to sell to credited rs in State :-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Exchange of Stock for Membership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
MT	 	 						103	140	
NE	 	 						 	 	
ONV	 -	 			 			 		
NH		 			 				 	
נא	×		\$1,118,731.63	4	\$1,074,531.60	5	\$44,200.03			
NM	1									
NY	x		\$1,118,277.07	4	\$1,079,819.14	3	\$38,457.93			
NC	1							1		
ND	 									
OH	1			<u> </u>						
OK	 									
ÓR										
PA										
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA										
WA										
WV										
WI										
WY										
PR										