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



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

		_ (1)/1/1/1/1/
OMB A	PPROVAL	14404 1
OMB Number:	3235-0076	7/1/
Expires: May 31, 2005		1
Estimated average burd	en	· (

SEC	USE C	NLY
Prefix		Serial
DATE	RECE	EIVED
		_

hours per response.

Name of Offering (check if this is an amendment ar	nd name has changed, and indicate change	
NYFIX, Inc. – Note Conversions		SOUDONED CO
Filing Under (check box(es) that apply): Rule 504	☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ULOE
Type of Filing: New Filing Amendment		
		// nn 3 n 2005
	A. BASIC IDENTIFICATION DATA	/ 3000
1. Enter the information requested about the issuer		12 m
		108
Name of Issuer (check if this is an amendment an	d name has changed, and indicate change.	
NYFIX, Inc.		
Address of Executive Offices (Number	and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
a	2	(202) 425 9000
Stamford Harbor Park, 333 Ludlow Street, Stamford, 6	Connecticut 06902	(203) 425-8000
,	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		
	limited partnership, already formed	other (please specify): Limited Liability
business trust	limited partnership, to be formed	Company DDCC SSSE
Actual or Estimated Date of Incorporation or Organiza	ation: Month Year	
	1 2 0 3	00 2005
		JUL 26 2005
	Actual Estin	nateu \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Jurisdiction of Incorporation or Organization: (Enter t	wo-letter U.S. Postal Service abbreviation	THOMSON ENANCIAL
		D E FINANCIAL
CN for	Canada; FN for other foreign jurisdiction	``
Civio	Currently	

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 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.

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 D	ATA	
2.	Enter the informa	tion requested for				
•	•	•	e issuer has been organize power to vote or dispose	, ,	,	or more of a class of equity securities of the
•	Each executive o		or of corporate issuers and er of partnership issuers.	l of corporate general and	I managing part	ners of partnership issuers; and
Check Bo	ox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Nam Hansen, I	e (Last name first,	if individual)	7			
Business	or Residence Addr		d Street, City, State, Zip (
	Harbor Park, 333 I		tamford, Connecticut 069 Beneficial Owner	02 Executive Officer	Director	General and/or
					Z Director	Managing Partner
Full Nam Deehan, (ne (Last name first, George O.	if individual)				
Business	or Residence Addr		d Street, City, State, Zip (
	ox(es) that Apply:		tamford, Connecticut 069 Beneficial Owner	Executive Officer	□ Director	General and/or
Eull Nom	ne (Last name first,	if individual)				Managing Partner
Lynch, W	Villiam J.					
			d Street, City, State, Zip C tamford, Connecticut 069			
	ox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
Full Nam	ne (Last name first,	if individual)				Managing Partner
Jennings,	, William C.		16: . 6: . 6: . 7: .	7. 4.)		
			d Street, City, State, Zip C tamford, Connecticut 069			
Check Bo	ox(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Nam Gasser, R	ne (Last name first,	if individual)				
Business	or Residence Addr		d Street, City, State, Zip C			
	Harbor Park, 333 ox(es) that Apply:	Promoter	tamford, Connecticut 069	Executive Officer	Director	☐ General and/or
						Managing Partner
Kragh, L		,				
Business	or Residence Addr	ess (Number an	d Street, City, State, Zip (tamford, Connecticut 069	Code) 102		
	ox(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or
Full Nam	ne (Last name first,	if individual)				Managing Partner
Hahn, Ma	ark		1 Ct t City Ctsts 7in t	Code)		
Business Stamford	or Residence Addr Harbor Park, 333	ess (Number an Ludlow Street, S	d Street, City, State, Zip (stamford, Connecticut 069	002		
	ox(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
	ne (Last name first,	if individual)				
Bellardo, Business	or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)		
	Harbor Park, 333 ox(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Nam	ne (Last name first,	if individual)				managing rando
Wainert,	Thomas C.		d Street, City, State, Zip	Code		
Stamford	or Residence Addr Harbor Park, 333	Ludlow Street, S	tamford, Connecticut 069	902		
Check B	ox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
	ne (Last name first,	if individual)				
Shaffer, . Business	or Residence Addi	ess (Number an	nd Street, City, State, Zip	Code)		
Stamford	d Harbor Park, 333	Ludlow Street, S	Stamford, Connecticut 069	902		

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				**************************************
Jamaitis, Keith R.		1			
Business or Residence Addre	ess (Number and	Street, City, State, Zip	Code)		
Stamford Harbor Park, 333 I	udlow Street, St	amford, Connecticut 069	002		
	(Use blank	sheet, or copy and u	se additional copies	of this sheet	, as necessary.)

Page 3 of 9

١.	Has the issue	r sold, or do	es the issue	er intend to	sell, to non	-accredited	investors in	this offerin	ng?			Yes No	
2.	What is the n	ninimum ini	vestment th				, Column 2, idual?	if filing un	der ULOE.			N/A	
3.	Does the offe	ring permit	joint owner	rship of a si	ngle unit?		• • • • • • • • • • • • • • • • • • • •			•••••		Yes No ⊠ □	
4.	solicitation of	f purchasers red with the	in connect SEC and/o	ion with sal or with a sta	les of securi	ties in the o	offering. If me of the br	a person to oker or dea	be listed is ler. If more	an associat	ted person o	or similar remuneration for or agent of a broker or to be listed are associated	
Full l	Name (Last na	me first, if	individual)						- Arnina				
Busin	ness or Reside	nce Addres	s (Number :	and Street,	City, State,	Zip Code)							
Nam	e of Associate	d Broker or	Dealer										_
State (Che	s in Which Pe ck "All States	rson Listed " or check is	Has Solicit ndividual S	ed or Intend tates)	ds to Solicit	Purchasers	3	************		***************************************		☐ All States	
[AL] [IL] [MT] [RI] Full I	[IN]	[AZ] [IA] [NV] [SD] ame first, if	[AR] [KS] [NH] [TN] individual)	[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]	
				1.044	City State	7:- C- 4-\							
Busii	ness or Reside	nce Addres _	s (Number	and Street,	City, State,	Zip Code)							
Nam	e of Associate	d Broker or	Dealer		1								
State (Che	s in Which Pe ck "All States	rson Listed " or check i	Has Solicit ndividual S	ed or Intend tates)	ds to Solicit	Purchasers	5					□ All States	-
[AL] [IL] [MT] [RI]	[IN]	[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.)

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 1. already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\simeg \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Type of Security Aggregate Offering Price Already Sold Equity 136,160 shares of common stock issued upon conversion of promissory notes Convertible Securities (including warrants)..... Partnership Interests Other (Specify)...... 691,343.42 Total \$ see above Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities 2. 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." Aggregate Number Dollar Amount Investors of Purchases 122,551 shares of Accredited Investors 10 common stock issued upon conversion of promissory notes 13,609 shares of Non-accredited Investors common stock issued upon conversion of promissory notes 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 3. 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. Dollar Amount Type of Type of offering Security Sold Rule 505 Regulation A.... Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the 4. 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. П Transfer Agent's Fees Printing and Engraving Costs Legal Fees..... Accounting Fees $\overline{\Box}$ Sales Commissions (specify finders' fees separately) Other Expenses (identify).....

Total

15,000

C. OFFERING PRICE, NU	MBER OF INVESTORS, EXPENSES	AN	D USE OF PE	ROCEEDS
b. Enter the difference between the agg — Question 1 and total expenses furnishe difference is the "adjusted gross proceed		proceeds – shares issued upon note conversion		
to be used for each of the purposes show furnish an estimate and check the box to	ed gross proceeds to the issuer used or proposed m. If the amount for any purpose is not known, the left of the estimate. The total of the gross proceeds to the issuer set forth in response			
			Payments to Officers, Directors & Affiliates	Payments to Others
Salaries and Fees			\$	\$
Purchase of real estate			\$	\$
	on of machinery and equipment		\$	<u> </u>
Construction or leasing of plant building			\$	□ \$
offering that may be used in exchange for	ng the value of securities involved in this or the assets or securities of another issuer		 \$	⊠ \$
		Ē		☐ \$
Working capital		\$	□ \$	
Other (specify)			\$	□ \$
Column Totals			\$	<u> </u>
Total Payments Listed (column totals ad	lded)		⊠ \$	N/A
	D. FEDERAL SIGNATURE		····	
under rule 505, the following signature	o be signed by the undersigned duly auth constitutes an undertaking by the issuer equest of its staff, the information furnish f Rule 502.	to f	urnish to the U.	S. Securities and
Issuer (Print or Type)	Signature	E	ate	
NYFIX, Inc.	Brin Bellander	J	uly 1 2005	
Name of Signer (Print or Type) BRIAN BELLARDO	Title of Signer (Print or Type) SECRETARY ATTENTION			
	ATTENTION Tomissions of fact constitute federal criminal viola	tion	s. (See 18 U.S.C. 1	1001.)

	E. STATE SIG	GNATURE		
**	CFR 230.262 presently subject to a	•	Yes	No
	See Appendix, Column	5, for state response.		
	eby undertakes to furnish to any stati imes as required by state law.	e administrator of any state in w	which this notice is filed, a notice	e on Form
 The undersigned issuer here offerees. 	eby undertakes to furnish to the state	administrators, upon written re	equest, information furnished b	y the issue:
Offering Exemption (ULO)	resents that the issuer is familiar with E) of the state in which this notice is if establishing that these conditions he d knows the contents to be true and l	filed and understands that the inave been satisfied.	ssuer claiming the availability	
Issuer (Print or Type)	Signature	Date	, - ₁ , - ₂ , - ₃ , - ₄ , - ₅	
NYFIX, Inc.	Brin Bel	lunder July	<u> </u>	
Name (Print or Type) BYCIAN BELLAR	Title (Print or Type) SECRE	TARY		
•		1	0 00 100/	

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		2	3		5				
	non ac	tend to sell to on accredited entors in State art C-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)						Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item	
State	Yes	No	Issuance of Stock for conversion of Notes	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL	,	1							-
AK				-					
AZ									
AR									
CA									_
CO									
C.L	1								
DE									
DC									
FL	į	х	\$80,265	1	\$80,265				
GA									
HI									
ID									
IL									
IN									
IA							<u> </u>		ļ
KS									
KY									
LA									
ME									
MD				· · · · · · · · · · · · · · · · · · ·					
MA				y 1 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				ļ	ļ
MI									
MN									
MS								<u> </u>	
MO									

APPENDIX

1		2	3	4					5
	Intend to sell to non accredited inventors in State (Part C-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		under ULOE atta explana waiver g	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item			
State	Yes	No	Issuance of Stock for conversion of Notes	Number of Accredited Investors	Amount	Number of Non- Accredite d Investors	Amount	Yes	No
MT									
NE									
NV									
NH									
NJ	х		\$107,802.42	2	\$51,124.72	6	\$56,677.70		
NM									
NY	Х		\$108,638.08	3	\$84,402.47	1	\$24,235.61		
NC									
ND									
ОН									
OK						<u></u>			
OR									
PA									
RI									
SC									<u> </u>
SD									<u> </u>
TN									
TX								ļ	<u> </u>
UT									<u> </u>
VT									<u> </u>
VA									ļ
WA						1			ļ
WV									
WI									-
WY									
PR	<u> </u>	1			1				