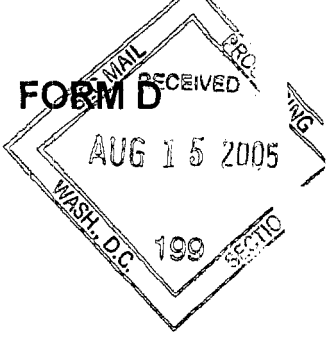


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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL table with OMB Number, Expires, and Estimated average burden.

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

SEC USE ONLY table with Prefix, Serial, and DATE RECEIVED.

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

Class I Beneficial Interests in Cole WG Metairie LA DST, a Delaware statutory trust

Filing Under (Check box(es) that apply): Rule 504, Rule 505, Rule 506, Section 4(6), ULOE

Type of Filing: New Filing, Amendment

PROCESSED stamp

A. BASIC IDENTIFICATION DATA

I. Enter the information requested about the issuer

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

Handwritten '3' and 'D', stamp AUG 22 2005 THOMSON FINANCIAL

Cole WG Metairie LA DST, a Delaware statutory trust (the "Trust")

Table with columns for Address of Executive Offices, Address of Principal Business Operations, and Telephone Number.

Brief Description of Business: To own a single-tenant commercial property known as Walgreens in Metairie, Louisiana (the "Property"), leased to Walgreen Louisiana Co., Inc.

Type of Business Organization: corporation, limited partnership, business trust, Other (please specify) Delaware statutory trust

Actual or Estimated Date of Incorporation or Organization: Month 07, Year 05 Actual Estimated



Jurisdiction of Incorporation or Organization (Enter two-letter U.S. Postal Service abbreviation for State: D E)

GENERAL INSTRUCTIONS

Federal: Who Must File, When To File, Where to File, Copies Required, Information Required, Filing Fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities...

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.

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.

Handwritten initials 'SE'

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 Managing Partner

Full Name (Last name first, if individual)

Cole Capital Partners, LLC

Business or Residence Address (Number and Street, City, State, Zip Code)

2555 E. Camelback Road, Suite 400, Phoenix, Arizona 85016

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Series B DST Depositor, LLC

Business or Residence Address (Number and Street, City, State, Zip Code)

2555 E. Camelback Road, Suite 400, Phoenix, AZ 85016

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manager of Trust

Full Name (Last name first, if individual)

Equity Fund Advisors, Inc.

Business or Residence Address (Number and Street, City, State, Zip Code)

2555 E. Camelback Road, Suite 400, Phoenix, AZ 85016

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer (1) Director(1) General and/or Managing Partner

Full Name (Last name first, if individual)

Cole, Christopher H.

Business or Residence Address (Number and Street, City, State, Zip Code)

2555 E. Camelback Road, Suite 400, Phoenix, AZ 85016

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer(1) Director General and/or Managing Partner

Full Name (Last name first, if individual)

Koblenz, Blair D.

Business or Residence Address (Number and Street, City, State, Zip Code)

2555 E. Camelback Road, Suite 400, Phoenix, AZ 85016

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer(1) Director General and/or Managing Partner

Full Name (Last name first, if individual)

Pons, John

Business or Residence Address (Number and Street, City, State, Zip Code)

2555 E. Camelback Road, Suite 400, Phoenix, AZ 85016

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General 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 and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

(1) Executive Officer or Director of Equity Fund Advisors, Inc., Manager of the Trust.

B. INFORMATION ABOUT OFFERING

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Yes No
 Answer also in Appendix, Column 2, if filing under ULOE.
2. What is the minimum investment that will be accepted from any individual? **\$369,400 (2)**
3. Does the offering permit joint ownership of a single unit? Yes No
4. Enter the information required 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.

Full Name (Last name first, if individual)
Cole Capital Corporation
 Business or Residence Address (Number and Street, City, State, Zip Code)
2555 E. Camelback Road, Suite 400, Phoenix, AZ 85016
 Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
 (Check "All States" or check individual States) 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 (Last name first, if individual)
 Business or Residence Address (Number and Street, City, State, Zip Code)
 Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
 (Check "All States" or check individual States) 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 (Last name first, if individual)
 Business or Residence Address (Number and Street, City, State, Zip Code)
 Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers
 (Check "All States" or check individual States) 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]

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

(2) Cole Capital Partners, LLC ("CCP"), the sponsor of the Trust, may determine in its sole discretion to accept an investment for less than the minimum.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. 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.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$ _____	\$ _____
Equity	\$ _____	\$ _____
<input type="checkbox"/> Common <input type="checkbox"/> Preferred		
Convertible Securities (including Warrants)	\$ _____	\$ _____
Partnership Interests	\$ _____	\$ _____
Other (Specify) <u>Class 1 Beneficial Interests</u>	\$ <u>3,694,000</u>	\$ <u>0</u>
Total	\$ <u>3,694,000</u>	\$ <u>0</u>

Answer also in Appendix, Column 3, if filing under ULOE.

2. 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."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	<u>0</u>	\$ <u>0</u>
Non-accredited Investors	<u>0</u>	\$ <u>0</u>
Total (for filings under Rule 504 only)	<u>N/A</u>	\$ <u>N/A</u>

Answer also in Appendix, Column 4, if filing under ULOE.

3. 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. **Not Applicable**

Type of offering	Type of Security	Dollar Amount Sold
Rule 505	<u>N/A</u>	\$ <u>N/A</u>
Regulation A	<u>N/A</u>	\$ <u>N/A</u>
Rule 504	<u>N/A</u>	\$ <u>N/A</u>
Total	<u>N/A</u>	\$ <u>N/A</u>

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	<input type="checkbox"/>	\$ _____
Printing and Engraving Costs	<input type="checkbox"/>	\$ _____
Legal Fees (3)	<input checked="" type="checkbox"/>	\$ <u>45,000</u>
Accounting Fees	<input type="checkbox"/>	\$ _____
Engineering Fees	<input type="checkbox"/>	\$ _____
Sales Commissions (specify finders' fees separately)	<input checked="" type="checkbox"/>	\$ <u>221,640</u>
Other Expenses (identify) <u>Marketing Allowance and due diligence</u>	<input checked="" type="checkbox"/>	\$ <u>36,940</u>
Total	<input checked="" type="checkbox"/>	\$ <u>303,580</u>

(3) Includes legal, printing, and other direct and indirect expenses.

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 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

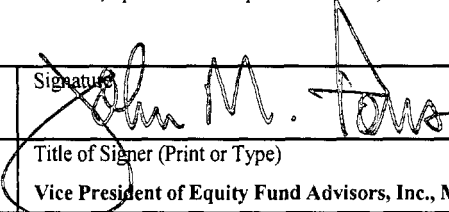
\$3,390,420

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.

	Payments to Officers, Directors & Affiliates		Payments to Others	
Salaries and Fees	<input checked="" type="checkbox"/>	\$ <u>332,676(4)</u>	<input type="checkbox"/>	\$ _____
Purchase of real estate	<input checked="" type="checkbox"/>	\$ <u>2,907,691(5)</u>	<input type="checkbox"/>	\$ _____
Purchase, rental or leasing and installation of machinery and equipment	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	\$ _____
Construction or lease of plant buildings and facilities	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	\$ _____
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)	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	\$ _____
Repayment of indebtedness	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	\$ _____
Working capital	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	\$ _____
Other (specify) <u>financing costs</u>	<input type="checkbox"/>	\$ _____	<input checked="" type="checkbox"/>	\$ <u>150,053</u>
.....				\$ _____
Column Totals	<input checked="" type="checkbox"/>	\$ <u>3,240,367</u>	<input checked="" type="checkbox"/>	\$ <u>150,053</u>
Total Payments Listed (column totals added)			<input checked="" type="checkbox"/>	\$ <u>3,390,420</u>

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Cole WG Metairie LA DST, a Delaware statutory trust	Signature 	Date August 9, 2005
Name of Signer (Print or Type) John M. Pons	Title of Signer (Print or Type) Vice President of Equity Fund Advisors, Inc., Manager of the Trust	

- (4) Includes Finance Coordination Fee of \$54,000. Includes an estimated allowance for reimbursement to CCP for a portion of direct expenses and costs of inspection in connection with the acquisition of the Property by the Trust in the amount of \$29,445. Also includes an Acquisition Fee received by an affiliate of CCP in the amount of \$249,231.
- (5) Amount represents reimbursement to depositor for the acquisition costs incurred by the Trust in its acquisition from an unaffiliated third party. The balance of the purchase price is evidenced by loan proceeds in the amount of \$5,400,000.

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

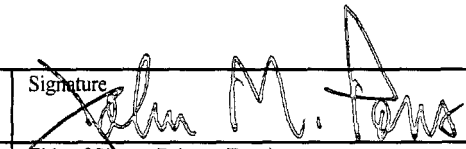
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? Yes No (6)

See Appendix, Column 5, for state response.

2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice 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 by 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 ready this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

THE FOREGOING UNDERTAKINGS AND REPRESENTATIONS ARE PROVIDED AND SHALL BE ENFORCEABLE AGAINST THE ISSUER ONLY TO THE EXTENT THAT SUCH UNDERTAKINGS AND REPRESENTATIONS ARE REQUIRED TO BE MADE AFTER APPLICATION OF THE NATIONAL SECURITIES MARKETS IMPROVEMENT ACT OF 1996.

Issuer (Print or Type) Cole WG Metairie LA DST, a Delaware statutory trust	Signature 	Date August 9, 2005
Name of Signer (Print or Type) John M. Pons	Title of Signer (Print or Type) Vice President of Equity Fund Advisors, Inc., Manager of the Trust	

(6) Not applicable for Rule 506 offerings.

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 State	2 Intended to sell to non-accredited investors in State (Part B-Item 1)		3 Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) (6)	
	Yes	No		Class 1 Beneficial Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes
AL		X	\$3,694,000						(6)
AK		X	\$3,694,000						(6)
AZ		X	\$3,694,000						(6)
AR		X	\$3,694,000						(6)
CA		X	\$3,694,000						(6)
CO		X	\$3,694,000						(6)
CT		X	\$3,694,000						(6)
DE		X	\$3,694,000						(6)
DC		X	\$3,694,000						(6)
FL		X	\$3,694,000						(6)
GA		X	\$3,694,000						(6)
HI		X	\$3,694,000						(6)
ID		X	\$3,694,000						(6)
IL		X	\$3,694,000						(6)
IN		X	\$3,694,000						(6)
IA		X	\$3,694,000						(6)
KS		X	\$3,694,000						(6)
KY		X	\$3,694,000						(6)
LA		X	\$3,694,000						(6)
ME		X	\$3,694,000						(6)
MD		X	\$3,694,000						(6)
MA		X	\$3,694,000						(6)
MI		X	\$3,694,000						(6)
MN		X	\$3,694,000						(6)
MS		X	\$3,694,000						(6)
MO		X	\$3,694,000						(6)

(6) Not applicable for Rule 506 offerings.

APPENDIX

1	2		3	4				5	
	Intended to sell to non-accredited investors in State (Part B-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)	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) (6)			
State	Yes	No	Class 1 Beneficial Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT		X	\$3,694,000						(6)
NE		X	\$3,694,000						(6)
NV		X	\$3,694,000						(6)
NH		X	\$3,694,000						(6)
NJ		X	\$3,694,000						(6)
NM		X	\$3,694,000						(6)
NY		X	\$3,694,000						(6)
NC		X	\$3,694,000						(6)
ND		X	\$3,694,000						(6)
OH		X	\$3,694,000						(6)
OK		X	\$3,694,000						(6)
OR		X	\$3,694,000						(6)
PA		X	\$3,694,000						(6)
RI		X	\$3,694,000						(6)
SC		X	\$3,694,000						(6)
SD		X	\$3,694,000						(6)
TN		X	\$3,694,000						(6)
TX		X	\$3,694,000						(6)
UT		X	\$3,694,000						(6)
VT		X	\$3,694,000						(6)
VA		X	\$3,694,000						(6)
WA		X	\$3,694,000						(6)
WV		X	\$3,694,000						(6)
WI		X	\$3,694,000						(6)
WY		X	\$3,694,000						(6)
PR		X	\$3,694,000						(6)

(6) Not applicable for Rule 506 offerings.