FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Golub Steven J 2. Date of Event Requiring Statement (Month/Day/Year) 05/04/2005				nent	3. Issuer Name and Ticker or Trading Symbol Lazard Ltd [LAZ, LDZ]							
(Last) 30 ROCKEFE (Street) NEW YORK (City)	(First) LLER PLAZA NY (State)	(Middle) 10020 (Zip)				ationship of Reporting Person (all applicable) Director Officer (give title below) President	on(s) to Issue 10% Owne Other (spe below)	er	(Mon	hth/Day/Year) dividual or Joint cable Line) Form filed b	Ate of Original Filed VGroup Filing (Check y One Reporting Person y More than One erson	
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						ınt of Securities ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common shares, par value \$1.00 per share						120	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)			ate	Underlying Derivative Security (Instr. 4) Conve		rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)				
			Date Exercisable	Expiratio Date	on Title	÷	Amount or Number of Shares	Price of Derivation	tive	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

/s/ Steven J. Golub

05/04/2005

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).