FISHER TIM Form 3 December 21, 2017 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> FISHER TIM			2. Date of Event Requ Statement (Month/Day/Year)	0 3. 155 00 1 1 (um	3. Issuer Name and Ticker or Trading Symbol CEDAR FAIR L P [FUN]						
(Last)	(First)	(Middle)	12/18/2017		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)				
ONE CEDA	R POINT I	DRIVE				× ×					
(Street)				(Check	(Check all applicable)		6. Individual or Joint/Group				
SANDUSK	Y, OH 4	14870		<i>w</i>			Filing(Chaol: Appliaghta Ling)				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned								
1.Title of Secur (Instr. 4)	rity			ount of Securities cially Owned 4)	Ownership C	. Nature of Ind Ownership Instr. 5)	irect Beneficial				
Reminder: Repo owned directly		ate line for ea	ch class of securities be	eneficially SI	EC 1473 (7-02)						
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.											
Т	`able II - Der	ivative Secu	rities Beneficially Owr	ned (e.g., puts, calls,	warrants, optio	ns, convertible	e securities)				
1. Title of Deri (Instr. 4)	vative Securit	Expir	ration Date Se /Day/Year) D	Title and Amount of ecurities Underlying perivative Security (nstr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)				

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

Date

Exercisable

Expiration

Title

Date

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
FISHER TIM ONE CEDAR POINT DRIVE SANDUSKY, OH 44870		Â	Â	Chief Operating Officer	Â		
Signatures							
Tim Fisher	12/21/2017						
<u>**</u> Signature of Date Reporting Person		Date					

Explanation of Responses:

No securities are beneficially owned

* 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).

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