

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

OMB Number:	3235-0	0076
	lay 31, 2005	
Estimated aver	rage burder	ı
hours per resp	onse:	16.00

SEC USE ONLY							
Prefix		Serial					
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Name of Offering (check if this is an amend	ment and name has changed, and indicate change.)	15511171
Goldman Sachs Global Relative Value II	plc: Shares	1254674
Filing Under (Check box(es) that apply):	Rule 504 □ Rule 505 ☑ Rule 506 □	☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing Amend	ment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the is	suer	
Name of Issuer (☐ check if this is an amend	ment and name has changed, and indicate change.)	
Goldman Sachs Global Relative Value II	ple	03059826
Address of Executive Offices (1	Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)
c/o Goldman Sachs Princeton LLC, 701 N 08540	Mount Lucas Road, Princeton, New Jersey	(609) 497-5500
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
To operate as a private investment fund.		
Type of Business Organization	, 	
□ corporation	☐ limited partnership, already formed	✓ other (please specify):
☐ business trust	☐ limited partnership, to be formed	Public Limited Company
	Month Year	DDOCESSED
Actual or Estimated Date of Incorporation or O		✓ Actual □ Estimated
•		/ AUG 2 0 2003
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviat	
	State: CN for Canada; FN for other foreign jur	isdiction) F N THOMSON
GENERAL INSTRUCTIONS		House
Federal:	consistes in relicuos on an anomatica under Description D	on Section 4(6) 17 CED 220 501 at any on 15 U.S.C.
77d(6).	ecurities in reliance on an exemption under Regulation D	of Section 4(0), 17 CFR 250.501 et seq. of 15 0.5.C.

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 requested. 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.

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.

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.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (7-00)



 Each beneficial own of the issuer; 	er having the po	wer to	o vote or dispose, or	direc	et the vote or disposit	tion (of, 10% or 1	nore o	of a class of equity securities
* Each executive offic	er and director o	of con	porate issuers and of	corp	orate general and ma	ınagi	ng partners	of par	tnership issuers; and
* Each general and ma	anaging partner o	of par	tnership issuers.						
Check Box(es) that Apply:	☑ Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)					_			
Goldman Sachs Princeton Ll	LC (the Issuer's	Inve	stment Manager)						
Business or Residence Addres	s (Number and	d Stre	eet, City, State, Zip C	Code)	ı				
701 Mount Lucas Road, Prin	ceton, New Jer	sey 0	8540	200000000000000000000000000000000000000		soci dell'associ			
Check Box(es) that Apply:	☐ Promoter				Executive Officer and the Issuer's Inv		Director* lent Manage		General and/or Managing Partner
Full Name (Last name first, if Clark, Kent A.	individual)	il de	an ing italih dagan Tanggarapat sababah P				i je		
Business or Residence Address do Goldman Sachs Princetor	and the second second		et, City, State, Zip Cucas Road, Princeto		Sales and result representations.				
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner		Executive Officer		Director* *of the Issu		General and/or Managing Partner
Full Name (Last name first, if	individual)								
Dilworth, James			· · · · · · · · · · · · · · · · · · ·						
Business or Residence Address			et, City, State, Zip C						
c/o Goldman Sachs Princetor	The second of the second second second	1000000000	Control of the Land on Tempolatical countries of	185 (3 FEB. 1888) C	Charles The September 1997 And Advisory	30.000			
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner		Executive Officer	Ø	Director* *of the Iss		General and/or Managing Partner
Full Name (Last name first, if Fitzgerald, Stephen	individual)						i j		ale Communication and a second se
Business or Residence Address c/o Goldman Sachs Princetor			et, City, State, Zip C ucas Road, Princeto		and the second second				
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner		Executive Officer and the Issuer's Investigation		Director* ent Manage		General and/or Managing Partner
Full Name (Last name first, if i	individual)								
Levy, Tobin V.									
Business or Residence Address	(Number and	d Stre	et, City, State, Zip C	lode)					
c/o Goldman Sachs Princeton	LLC, 701 Mou	int L	ucas Road, Princeto	n, N	ew Jersey 08540	West 125.0	- Armi	See See See S	
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner		Executive Officer	◩	Director* *of the Iss		General and/or Managing Partner
Full Name (Last name first, if i McGeough, David J.	ndividual)								
Business or Residence Address		100	et. City, State, Zip C ucas Road, Princeto		ew Jersey 08540	J. J		te de	
Check Box(es) that Apply:	☐ Promoter				Executive Officer*		Director* *of the Iss		General and/or Managing Partner
Full Name (Last name first, if i	ndividual)								
Regan, Eugene									
Business or Residence Address	(Number and	Stree	et, City, State, Zip C	ode)					
c/o Goldman Sachs Princeton									
	(Use blank sl	neet,	or copy and use addi	tiona	d copies of this sheet	., as 1	necessary.)		

Enter the information requested for the following:

Each promoter of the issuer, if the issuer has been organized within the past five years;

2.

503869.3 Page 2 of 9 SEC 1972 (7-00)

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 *of the Issuer Managing Partner Full Name (Last name first, if individual) Sotir, Theodore T. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540 Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or ☐ Promoter *of the Issuer and the Issuer's Investment Manager Managing Partner Full Name (Last name first, if individual) Walker, George H. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer* General and/or *of the Issuer's Investment Manager Managing Partner Full Name (Last name first, if individual) Blood, David W. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* □ General and/or *of the Issuer's Investment Manager Managing Partner Full Name (Last name first, if individual) Ford, David B. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540 Beneficial Owner Check Box(es) that Apply: ☐ Promoter Executive Officer* □ Director* General and/or *of the Issuer's Investment Manager Managing Partner Full Name (Last name first, if individual) Gall, Natalie M. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Goldman Sachs Princeton LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ General and/or Executive Officer Director 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 ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA

Enter the information requested for the following:

503869.3 Page 3 of 9 SEC 1972 (7-00)

1. Has th	ne issuer sol	d, or does th	ne issuer int	end to sell.	to non-accr	edited inves	stors in this	offering?			Yes	No ☑
		-,			in Append			-				
2. What	is the minin	num investn	nent that wil	ll be accept	ed from any	individual	?				\$ 1,00	00,000*
*The Directors of the Company at their discretion may accept subscriptions for lesser amounts. 3. Does the offering permit joint ownership of a single unit?											Yes ☑	No
comm If a pe or stat	the informatission or singlession to be less, list the recorded terms of the second te	milar remun isted is an a name of the	eration for s ssociated pe broker or d	solicitation erson or age ealer. If me	of purchase ent of a brok ore than five	rs in conne ter or dealer e (5) person	ction with s registered s to be liste	ales of secu with the SE	rities in the C and/or wi	offering. th a state		
Full Name	e (Last name	e first, if inc	lividual)									
Goldman	, Sachs & C	Co.										
	or Residence		Number and	Street, Cit	y, State, Zip	Code)						
85 Broad	Street, Nev	v York. Ne	w York 100	104								
	Associated F			,,,,,								
	Which Perso											1 States
[AL]	'All States" ([AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	W Ai [HI]	[ID]
(AL)	[IN]	[AI]	[KS]	[KY]	[CO] [LA]	[ME]	[DL] [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]
	e (Last name	e first, if ind	lividual)									
Business o	or Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated E	Broker or De	ealer									
States in V	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers	 -				 _	
(Check "	All States"	or check ind	lividual Stat	es)			•••••		••••••	••••••	🗆 Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MĎ]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] Full Name	[SC]	[SD] first, if ind	[TN] ividual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Business of	or Residence	e Address (N	Number and	Street, City	y, State, Zip	Code)			-			
Name of A	Associated E	Broker or De	ealer									
	Which Perso All States" of										П	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[AK] [IN]	[IA]	[KS]	[KY]	[CO] [LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

B. INFORMATION ABOUT 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

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 \(\sigma\) 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	\$_	0	. \$		0
	Equity (Shares)	\$	3,560,000	\$		3,560,000
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$_	0	. \$		0
	Partnership Interests	\$_	0	. \$		0
	Other (Specify)		0	. \$		0
	Total	\$	3,560,000	\$		3,560,000
	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		5	\$		3,560,000
	Non-accredited Investors	-		. \$ \$	_	0
	Total (for filings under Rule 504 only)	_	N/A	. \$ \$		N/A
	Answer also in Appendix, Column 4, if filing under ULOE.	_	17/4	. Ψ		IVA
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.		Type of			Dollar Amount
	Type of offering		Security	¢		Sold
	Rule 505		N/A	\$	_	N/A
	Regulation A		N/A	. \$. \$		N/A
	Rule 504	_	N/A			N/A
	Total	-	N/A	\$		N/A
tl tl	.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 the expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$		0
	Printing and Engraving Costs			\$		0
	Legal Fees		Ø	\$		51,019
	Accounting Fees			\$		0
	Engineering Fees			\$		0
	Sales Commissions (specify finders' fees separately)		Ø	\$		10,680
	Other Expenses (identify) legal, accounting and miscellaneous			\$		
	Total		ゼ	\$		61,699

	 b. Enter the difference between the aggreg- - Question 1 and total expenses furnished difference is the "adjusted gross proceeds to 	in response to Part C - Question	4.a. Thi	s		\$_		3,498,301
i.	Indicate below the amount of the adjusted to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted groto Part C - Question 4.b. above.	If the amount for any purpose is not the left of the estimate. The to	not know <i>t</i> otal of th	ı, e				
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees		🗖	\$_	0		\$_	0
	Purchase of real estate		🗖	\$_	0		\$	0
	Purchase, rental or leasing and installation of	of machinery and equipment	🗆	\$_	0		\$	0
	Construction or leasing of plant buildings a	nd facilities	🗖	\$_	0		\$_	0
	Acquisition of other businesses (including this offering that may be used in exchar another issuer pursuant to a merger)	ge for the assets or securities of		\$	0		\$	0
	Repayment of indebtedness		-	* - \$	0	_	* – \$	0
	Working capital			* - \$	0		* — \$	0
	Other (specify): Investment Capital			\$ - \$	0	Ø	* – \$	3,498,301
	Column Totals			* - \$	0	Ø	* - \$	3,498,301
				-		_	_	
	Total Payments Listed (column totals added				☑ \$	3,49	8,301	
		D. FEDERAL SIGNAT	TURE			51	ė,	
fc	he issuer has duly caused this notice to be ollowing signature constitutes an undertaking fits staff, the information furnished by the iss	by the issuer to furnish to the U.S	. Securiti	es an	d Exchange Comm	ission,	upon	
	er (Print or Type) dman Sachs Global Relative Value II plc	Signature Natalie M. Jal	0		Date August <u>13</u> , 2003			
lar	ne of Signer (Print or Type)	Title of Signer (Print on Type)						
lat	alie M. Gall	Vice President of the Issuer's Inv	vestment	Man	ager			

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

ATTENTION

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