FORM D

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: 3235-0076

Expires: April 30, 2008 Estimated average burden

hours per response: 16.00

SEC USE ONLY							
Prefix	Serial						
	DATE	RECEIVED					

Name of Offering (check if this is an amendmen		
Goldman Sachs Global Equity Long/Short, I	LC: Units of Limited Liability Company Inter	
Filing Under (Check box(es) that apply): Ru	le 504 □ Rule 505 ☑ Rule 506 □	Section 4(6) ULOE
Type of Filing: ☐ New Filing ☑ Amendme		
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issue	r	14400 4471 1914 4471 1914 4444 1001 4744 1011 1471
Name of Issuer (check if this is an amendment	at and name has changed, and indicate change.)	1 18 8 TH FRENCH FRANK FRA
Goldman Sachs Global Equity Long/Short, I	LLC	07072313
Address of Executive Offices (Num	nber and Street, City, State, Zip Code)	Telephone romoer (monage - 7)
c/o Goldman Sachs Hedge Fund Strategies I. Jersey 08540	LC, 701 Mount Lucas Road, Princeton, New	(609) 497-5500
Address of Principal Business Operations (N	umber and Street, City, State, Zip Code)	Celephone Number (Including Area Code)
(if different from Executive Offices)	PROCESSI	- 19n/
Brief Description of Business		
To operate as a private investment fund.	1 JUL 19 2007	.!!! 1 6 2007
Type of Business Organization	THOMSON	(S) 200 (S)
□ corporation □	Ilimited partnership, already for INIANCIAL	other (please specify): Limited Liability Company
□ business trust 0	☐ limited partnership, to be formed	Limited Liability Company
	Month Year	
Actual or Estimated Date of Incorporation or Orga	nization: 0 7 0 1	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviation	on for
	State: CN for Canada; FN for other foreign juris	diction) D E
CENERAL 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.

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.

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)									
Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Managing Member)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540									
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 Fund, LLC									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540									
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 Hedge Fund Partners, LLC									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Citco SGHB as Custodian for Goldman Sachs Hedge Fund Partners Plus, LLC									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540									
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 Hedge Fund Partners II, LLC									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, 701 Mount Lucas Road, Princeton, New Jersey 08540									
Check Box(es) that Apply:									
Full Name (Last name first, if individual)									
Barbetta, Jennifer									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, 32 Old Slip, New York, New York 10005									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director* ☐ General and/or *of the Issuer's Managing Member Managing Partner									
Full Name (Last name first, if individual)									
Clark, Kent A.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004									
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)									

A. BASIC IDENTIFICATION DATA

SEC 1972 (7-00)

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 ma	□ Promoter				Executive Officer	<u> </u>	Director*	П	General and/or
Check Box(es) that Apply:	□ Promoter	Ц	Beneficial Owner	_	the Issuer's Managi	_			Managing Partner
Full Name (Last name first, if	individual)						·		<u> </u>
Lawson, Hugh J.									<u></u>
Business or Residence Addres	s (Number and	Stre	et, City, State, Zip C	Code)	1				
c/o Goldman Sachs Hedge Fi	und Strategies L	LC,			ew York, New Yor	k 10	004		
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 Addres	s (Number and	l Stre	et, City, State, Zip C	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 Addres	s (Number and	l Stre	eet, City, State, Zip C	Code))		-		
Check Box(es) that Apply:	☐ Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)	ĺ							
Business or Residence Addres	s (Number and	l Stre	et, 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 Addres	s (Number and	Stre	eet, 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	s (Number and	l Stre	eet, City, State, Zip (Code))				
Check Box(es) that Apply:	☐ Promoter	()	Beneficial Owner		Executive Officer	0	Director		General and/or Managing Partner
Full Name (Last name first, if	individual)								
Business or Residence Address	s (Number and	Stre	eet, City, State, Zip (Code)				
	(Use blank s	heet,	or copy and use add	lition	al copies of this she	et, as	necessary.)		

•				B. IN	FORMAT	ION ABO	UT OFF	ERING			•	
									•		Yes	No
1. Has th	e issuer solo	d, or does th	ne issuer int	end to sell,	to non-accr	edited inves	tors in this	offering?		***************************************	Ø	
			I	Answer also	in Append	ix, Column	2, if filing t	under ULOI	Ξ.			
2. What	2. What is the minimum investment that will be accepted from any individual?										\$	00,000*
*The Managing Member at its discretion may accept subscriptions for lesser amounts. 3. Does the offering permit joint ownership of a single unit?											Yes ☑	No
4 Enter	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any											
comm If a pe or stat	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.											
	er or dealer, (Last name			information	for that bro	oker or deal	er only.					
	•		,									
	, Sachs & C or Residence		Number and	Street, Cit	v. State. Zir	Code)				 	~ ··	
					,,, <u>-</u> .,	,						
	Street, Nev			104								· · · · ·
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	Which Perso				o Solicit Pu	rchasers						
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[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	(Last name		[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
r un rvanc	(Lust name	, msi, n ma	ividualj									
Rusinass	or Residence	Address (Number and	Stroot City	Ctota 7in	(Coda)						
Dusiness (n residence	. Address (:	vuilloer allu	Succe, City	y, State, Zip	(Couc)						
Name of A	Associated B	roker or De	ealer				 	*				
	Vhich Perso					rchasers						
	All States"			-								1 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]
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ruii Name	(Last name	irst, it ind	ividual)									
Business o	or Residence	Address ()	Number and	Street City	v State Zin	Code)						
		(20000, 011,	,, - , -							
Name of A	Associated B	roker or De	ealer									
	Vhich Perso All States" o											All States
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[MT]	[NE]	[NV]	[NH]	[נאז]	[NM]	[NY]	[NC]	[ND]	[OH]	[MK]	[MS]	[PA]
נסו) ניייון	נינין	[6D]	וייון	נייון	נוודו	[אירו]	(VA)	נאטן	twy	(WII)	[U/V]	ני אן ני אן

[TN] [TX] [UT] [VT] [VA] [WA] [WV]

(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.	amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\Pi\) 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	-	s _	0
	Equity (Limited Liability Company Units)	\$_	0		s _	0
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$_	0	-	s _	0
	Partnership Interests	\$_	0	_	s _	0
	Other (Specify Units of Limited Liability Company Interests)	\$_	677,829,138		s _	677,829,138
	Total	\$	677,829,138		\$_	
	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."		N. I			Aggregate
			Number Investors			Dollar Amount of Purchases
	Accredited Investors		175		\$_	677,754,138
	Non-accredited Investors		1	_ ;	\$ <u> </u>	75,000
	Total (for filings under Rule 504 only)	_	N/A	-	\$ [_]	N/A
	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.		Type of Security			Dollar Amount Sold
	Type of offering Rule 505		N/A		\$	N/A
	Regulation A	-	N/A	-	ึ − \$	N/A
	Rule 504	-	N/A	-	" — \$	N/A
	m . 1	_		- '	^ _	N/A
	1 Ota1	-	N/A	• '	³ —	N/A
th th	.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		团	;	s _	222,418
	Accounting Fees		团	:	\$ _	20,000
	Engineering Fees			;	\$	0
	Sales Commissions (specify finders' fees separately)			;	s _	0
	Other Expenses (identify)			:	s —	0
	Total		Ø		s –	242,418
					_	

	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXP	ENS	ES A	AND USE OF PI	ROCE	EDS				
	 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	. Th	is		\$_		677,586,720			
5.	Indicate below the amount of the adjusted at to be used for each of the purposes shown, furnish an estimate and check the box to payments listed must equal the adjusted gro to Part C - Question 4.b. above.										
					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 as	nd facilities		\$_	0		\$_	0			
	Acquisition of other businesses (including this offering that may be used in exchan another issuer pursuant to a merger)	ge for the assets or securities of	_	\$	0	_	\$	0			
	Repayment of indebtedness			\$	0		\$	0			
	Working capital			s –	0		s -	0			
	Other (specify): Investment Capital			\$ -	0	2	\$	677,586,720			
	Column Totals			\$_	0	. Ø	\$_	677,586,720			
Total Payments Listed (column totals added)								677,586,720			
		D. FEDERAL SIGNATU	RE								
fe	he issuer has duly caused this notice to be sollowing signature constitutes an undertaking fits staff, the information furnished by the iss	by the issuer to furnish to the U.S. Se	ecurit	ies an	d Exchange Comm	nission,	upon				
	er (Print or Type) dman Sachs Global Equity Long/Short, C	Signature Landonne	_		Date July 1/2007						
Naı	ne of Signer (Print or Type)	Title of Signer (Print or Type)									
Ka	Kathryn Pruess Vice President of the Issuer's Managing Member										

ATTENTION

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

