

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

	39	8895
ı		9 ,19

OMB APPROVAL						
OMB Number:	3235-0076					
Expires: April 30, 2008						
	Estimated average burden					
hours per response 16.00						

SEC USE ONLY						
Prefix		Serial				
DA	TE RECEIV	ED				

New York in the State of the St	-1
Name of Offering (check if this is an amendment and name has changed, and indicate	
Blackstone Strategic Alliance Fund L.P. – offering of Limited Partr	nership interests
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 50	6 ☐ Section 4(6) ☑ ULOE
Type of Filing: ☐ New Filing ☐ Amendment	
	I IPEN SOUL INCH STULL IPPN BILL CITY SINCE
A. BASIC IDENTIFICATION DA	ATA IIII IIII IIII III
1. Cotas the information required about the inques	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate	change.) 07075464
Blackstone Strategic Alliance Fund L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
,,,,,,,,	(212) 583-5000
345 Park Avenue, New York, New York 10154	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	<u> </u>
·	DBAACOARD
Investment in securities	PROCESSED
Type of Business Organization	
☐ corporation ☐ limited partnership, already formed 👫 🗓 other (pl	lease specify): AUG 2 4 2007
□ business trust □ limited partnership, to be formed	MODE 1 ZOU
Month Year	THOMSON
Actual or Estimated Date of Incorporation or Organization: 12 06 🛛 Actual [I Fetimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbre	
CN for Canada; FN for other foreign juris	diction)
GENERAL 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. 77d(6).

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 Avenue, 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.

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 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.

	A. BASIC IDE	NTIFICATION DATA					
 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)							
Business or Residence Address (Number	r and Street, City; State	, Zip Code)					
Check Box(es) that Apply:	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number	r and Street, City, State	e, 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	r and Street, City, State	e, 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	r 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	r and Street, City, State	e, 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	r and Street, City, State	e, Zip Code)					

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

☐ Executive Officer

□ Director

☐ General and/or Managing Partner

☐ Beneficial Owner

(Number and Street, City, State, Zip Code)

□ Promoter

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Business or Residence Address

						B. INFO	RMATIO	N ABOU	T OFFER	RING					
1.	Has the	issuer so	ld or does	the issue	r intend to	sell to no	n-accredit	ed investo	re in this o	ffering?			Yes		No □
•	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.											_			
2.										\$					
3.	Does th	e offering	permit joi	nt ownersh	ip of a sin	ale unit?	************						Yes · □	3	No
4.	Enter th	ne informa	ation requ	ested for	each pers	on who h	as been	or will be	paid or g	iven, direc	ctly or ind	lirectly, any			ш
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. N/A															
Full Name (Last name first, if individual)															
Bus	iness or l	Residence	Address	(Number a	and Street,	City, State	e, Zip Cod	e)							<u> </u>
			_							_					
Nan	ne of Ass	ociated B	roker or D	ealer											
Stat						ls to Solici									
														tates	
	AL	AK]	AZ	AR	CA	CO	CT .		DC	FL	GA	HI			
	IL MT	NE NE	IA NV	KS NH	NJ KY	[LA]	ME)	MD	MA	MI	MN	MS	MO		
	RI	SC	SD	TN	[TX]	NM) UT	NY VT	NC VA	ND WA	OH)	OK]	OR WY	PA PR		
Full		ast name						[TAU.	777	1441	رببي	[[]]		
Bus	iness or l	Residence	Address	(Number a	and Street,	City, State	e, Zip Cod	e)							
Nar	ne of Ass	ociated B	oker or D	ealer											
Stat						ls to Solici							. 🔲 All Si	tates	
	AL	AK	[ĀZ]	AR	CA)	CO	CT	DΕ	DC	FL	GA	HI		aics	
		IN	[A]	KS	ΚΫ́	LA	ME	MD	MA	MI	MN	MS	MO		
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK)	OR	PA		
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR		
Full	Name (L	ast name	first, if ind	ividual)											
Bus	iness or l	Residence	Address	(Number a	and Street,	City, State	e, Zip Code	e)					<u> </u>		<u> </u>
Non	no of Acc	ociated Bi	okar ar D	nalar.											
IVAII	IIE UI ASS	ocialeo bi	oker or Di	ealei			1		'						_
Stat					_	ls to Solici							□ All Co	atec	
(Check "All States" or check individual States)															
		IN	IA	KS)	KY	ΪΑ	ME	MD	DC MA	FL MI	GA MN	HI 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	W	WY	PR		

4 Marie 11

(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 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggregate Offering Pri		Amo	ount Already Sold
	Debt	\$ <u>N/A</u>		\$_	N/A
	Equity	s N/A		\$	N/A
	☐ Common ☐ Preferred			_	
	Convertible Securities (including warrants)	\$ <u>N/A</u>		\$	N/A
	Partnership Interests	\$ <u>1,000,000,</u>	000_	\$ <u>39</u>	90,750,000
	Other (Specify)	\$N/A		\$	N/A
	Total	\$1,000,000,	000	\$39	0,750,000
	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		Do	iggregate Ilar Amount Purchases
	Accredited Investors	47		\$ <u>39</u>	0,750,000
	Non-accredited Investors	0		\$_	0
	Total (for filings under Rule 504 only)			\$	
	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 Offering	Type of Security		Do	llar Amount Sold
	Rule 505	N/A		\$	N/A
	Regulation A			\$	N/A
	Rule 504			\$	N/A
	Total			\$	N/A
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.	, , ,		*_	N. P.
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		\boxtimes	\$ <u>221</u>	,666
	Accounting Fees	*********		s _	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	_0
	Total	************	_ ⊠	\$ <u>221</u>	,666

	C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSES AND USE	OF P	ROCEEDS		
,	and total expenses furnished in response to Pa	e offering price given in response to Part C — Question 1 art C - Question 4.a. This difference is the "adjusted gross			\$ <u>999</u>	,778,334
j.	each of the purposes shown. If the amount for	ss proceeds to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and check I of the payments listed must equal the adjusted gross Part C — Question 4.b above.		ayments to Officers, birectors, & Affiliates		ments to Others
	Salaries and fees		□\$_	0	_ 🗆 \$	0
	Purchase of real estate		□\$_	0	_ 🗆 \$	0
	Purchase, rental or leasing and installation and equipment	on of machinery	□\$_	0	_ 🗆 \$	0
	Construction or leasing of plant buildings	and facilities	□\$_	0	_ 🗆 \$	0
	Acquisition of other businesses (including offering that may be used in exchange fo issuer pursuant to a merger)		□ \$_	0	_ 🗆 \$	0
	Repayment of indebtedness		□\$_	0	_ 🗆 \$	0
	Working capital		□ \$_	0	_ 🗆 \$	0
	Other (specify): INVESTMENTS		□\$_	0	_ ⊠ \$ <u>999</u>	,778,334
		<u> </u>	□ \$_	Q	_ 🗆 \$	0
	Column Totals		□\$_	0	_ ⊠ \$ <u>999</u>	,778,334
	Total Payments Listed (column totals add	ded)		⊠ \$ <u>99</u>	9,778,334	
		D. FEDERAL SIGNATURE				
ig	nature constitutes an undertaking by the issue	ned by the undersigned duly authorized person. If this ner to furnish to the U.S. Securities and Exchange Comaccredited investor pursuant to paragraph (b)(2) of Rule 50.	missio	s filed under l n, upon writte	Rule 505, ti en request	ne following of its staff,
31	uer (Print or Type) ackstone Strategic Alliance and L.P.	Signature Sw.	, A	Pate August <u>/</u> 5	, 2007	
	ne of Signer (Print or Type) ian F. Gavin	Title of Signer (Print or Type) Authorized Person of Blackstone Strat L.L.C., the general partner of Blacksto L.P.	_			

ATTENTION -

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