

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 54						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
The Goldman Sachs Group Inc PAC

Full Name (Last, First, Middle Initial) A. James Sprayegen		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7	
Mailing Address 1 New York Plaza		Transaction ID: 30866	
City State Zip Code New York NY 10004		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Goldman Sachs Investment Banker		Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Kimberly Johns		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7	
Mailing Address 1 New York Plaza		Transaction ID: 30872	
City State Zip Code New York NY 10004		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Goldman Sachs Investment Banker		Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Oliver L. Frankel		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7	
Mailing Address 85 Broad Street		Transaction ID: 30881	
City State Zip Code New York NY 10004		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Contribution	
Name of Employer Occupation Goldman Sachs Investment Banker		Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	3250.00
TOTAL This Period (last page this line number only) ▶	