

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

GOLDMAN SACHS PARTNERS POLITICAL ACTION COMMITTEE
1101 PENNSYLVANIA AVENUE, N.W. SUITE 3500
WASHINGTON, D.C. 20004
202-687-9700

January 31, 1997

Federal Election Commission
999 E Street, NW
Washington, DC 20463

RE: FEC Identification Number C00265124

Dear Sir or Madam:

Enclosed for filing is one manually-signed FEC Form 1 Statement of Organization reflecting a name change from Goldman Sachs Partners Political Action Committee to Goldman Sachs Political Action Committee effective January 27, 1997. Please date stamp the extra copy of this report and return it to the messenger. Thank you.

Very truly yours,

Judah C. Sommer
Treasurer

Enclosures

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

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FEDERAL ELECTION
COMMISSION
MAIL ROOM
JAN 31 3 55 PM '97

1. (a) NAME OF COMMITTEE IN FULL Goldman Sachs Political Action Committee		<input checked="" type="checkbox"/> (Check if name is changing)	2. DATE 1/27/97
11) Number and Street Address 1101 Pennsylvania Avenue, N.W., Suite 900		<input type="checkbox"/> (Check if address is changed)	3. FEC Identification Number 000265124
1c) City, State and ZIP Code Washington, D.C. 20004		4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

5. TYPE OF COMMITTEE (Check one)

(a) This committee is a principal campaign committee. (Complete the candidate information below.)

(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate	Candidate Party Affiliation	Office Sought	State/District

(c) This committee supports/opposes only one candidate, _____ and is NOT an authorized committee.
(name of candidate)

(d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)

(e) This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization

Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position


8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Judah C. Sommer	SIGNATURE OF TREASURER 	DATE 1/27/97
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

