GOLDMAN SACHS GROUP INC

Form 4

December 30, 2016

FORM 4 UNITED STATES SECURITIES AND EVCHANCE COMMISSION									OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549							OMMISSION	OMB Number:	3235-028			
Check th			1145	g ,					Expires:	January 31		
if no lon subject t Section : Form 4 c	16.		ES IN B SECURI		ERSHIP OF	Estimated a burden hour response						
Form 5 obligation may con <i>See</i> Instraction 1(b).	ons tinue. Section	17(a) of the		ity Holdi	ng Comp	any Ac	ct of	Act of 1934, 1935 or Section	1			
(Print or Type	Responses)											
1. Name and Address of Reporting Person * Schwartz Mark			Symbol	2. Issuer Name and Ticker or Trading Symbol GOLDMAN SACHS GROUP INC					5. Relationship of Reporting Person(s) to Issuer			
			[GS]					(Check	all applicable)		
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					Director Officer (give t		Owner r (specify		
	MAN, SACHS EST STREET		12/29-05:	00/2016					ce Chairman			
	(Street)		4. If Amend Filed(Month		Original			6. Individual or Joi Applicable Line) _X_ Form filed by O	ne Reporting Per	rson		
NEW YOR	K, NY 10282						1	Form filed by M Person	ore than One Rep	porting		
(City)	(State)	(Zip)	Table 1	I - Non-De	rivative Se	curities	Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Execu any	eemed ation Date, if th/Day/Year)	3. 4. Securities Acquire Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock, par value \$0.01 per share	12/29-05:00/	2016		G V	10,390			997,666	D			
Common Stock, par value \$0.01 per share								4,000	I	See footnote (1)		

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	•	6. Date Exerc	cisable and	7. Tit	le and	8. Price of	
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Amou	int of	Derivative		
	Security	or Exercise		any	Code	of	f	(Month/Day/	Year)	Under	rlying	Security	
(Instr. 3)		Price of		(Month/Day/Year)	(Instr.	8) Derivative				Securities		(Instr. 5)	
		Derivative				Se	ecurities			(Instr. 3 and 4)			
		Security				A	cquired						
						(A	A) or						
						D	isposed						
						of	f (D)						
						(I	nstr. 3,						
						4,	and 5)						
											Amount		
											Amount		
								Date	Expiration	Ti+la	Or		
								Exercisable	Date		Number		
				C- 1-	3 7 ()	(D)				of			
					Code	V (F	A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Schwartz Mark C/O GOLDMAN, SACHS & CO. 200 WEST STREET NEW YORK, NY 10282

Vice Chairman

Signatures

/s/ Benjamin J. Rader, Attorney-in-fact

12/30-05:00/2016

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Held through trusts, the sole trustee of which is the Reporting Person's spouse and the sole beneficiaries of which are immediate family members of the Reporting Person. The Reporting Person disclaims beneficial ownership of these shares.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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