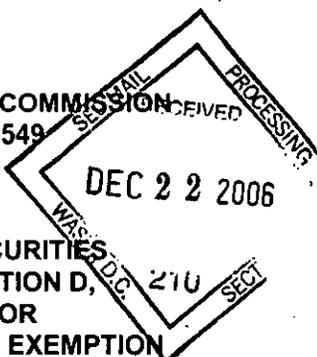




UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



OMB APPROVAL table with OMB Number 3235-0076, Expires April 30, 2008, and Estimated average burden 16.00 hours per response.

SEC USE ONLY table with Prefix, Serial, and DATE RECEIVED fields.

Name of Offering (Citigroup Capital Partners II Onshore, L.P.), Filing Under (Rule 506 checked), Type of Filing (Amendment checked).

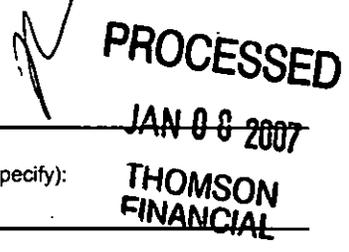
A BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer. Name of Issuer (Citigroup Capital Partners II Onshore, L.P.).

Address of Executive Office (388 Greenwich Street, New York, NY, 10013) and Telephone Number (212-816-6000).

Address of Principal Business Operations (if different from Executive Offices) and Telephone Number.

Brief Description of Business: To invest, directly or indirectly, in private equity investment opportunities.



Type of Business Organization (limited partnership, already formed checked).

Actual or Estimated Date of Incorporation or Organization (Month 07, Year 06, Actual checked).

Jurisdiction of Incorporation or Organization (State: DE).

GENERAL INSTRUCTIONS

Federal: Who Must File, When to File, Where to File, Copies Required, Information Required, 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.

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.

SEC 1972 (05-05) 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 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 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)

Citigroup Private Equity LP

Business or Residence Address (Number and Street, City, State, Zip Code)

388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Barber, John

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Arnold, George

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Benson, Todd

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Cabasso, Sheri

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Coeny, Matthew

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Cole, Carolyn

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Farnsworth, Craig

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Friedman, Darren

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Friedman, David

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Jacobson, Blair

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Citigroup Private Equity LP, 33 Cavendish Square, 8th Floor, London W1G 0PW, U.K.

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Jain, Rakesh

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Weekes Jr., Townsend

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Womsley, Robert

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Citigroup Private Equity LP, 33 Cavendish Square, 8th Floor, London W1G 0PW, U.K.

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Deluise, James

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Hemmer, Kenneth

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)
Ramanathan, Ranesh

Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Smith, David

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Plata, Sonia

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o Citigroup Private Equity LP, 388 Greenwich Street, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Citigroup Global Markets Inc.

Business or Residence Address (Number and Street, City, State, Zip Code)

388 Greenwich Street, 18th Floor, New York, NY 10013

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Citicorp Investment Services

Business or Residence Address (Number and Street, City, State, Zip Code)

666 Fifth Avenue, 6th Floor, New York, NY 10103

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

Full Name (Last name first, if individual)

Citibank International PLC

Business or Residence Address (Number and Street, City, State, Zip Code)

33 Canada Square, Canary Wharf, London E14 5LB, U.K.

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

B. INFORMATION ABOUT OFFERING

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Yes No
 Answer also in Appendix, Column 2, if filing under ULOE.
2. What is the minimum investment that will be accepted from any individual? \$500,000
3. Does the offering permit joint ownership of a single unit? Yes No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any 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.

Full Name (Last name first, if individual)
 Citigroup Global Markets Inc.

Business or Residence Address (Number and Street, City, State, Zip Code)
 388 Greenwich Street, 18th Floor, New York, NY 10013

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) All 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]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)
 Citicorp Investment Services

Business or Residence Address (Number and Street, City, State, Zip Code)
 666 Fifth Avenue, 6th Floor, New York, NY 10103

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) All 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]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

Full Name (Last name first, if individual)
 Citibank International PLC

Business or Residence Address (Number and Street, City, State, Zip Code)
 33 Canada Square, Canary Wharf, London E14 5LB, U.K.

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check "All States" or check individual States) All 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]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(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 Price	Amount Already Sold
Debt	\$ _____	\$ _____
Equity	\$ _____	\$ _____
<input type="checkbox"/> Common <input type="checkbox"/> Preferred		
Convertible Securities (including warrants)	\$ _____	\$ _____
Partnership Interests	\$510,950,000	\$510,950,000
Other (Specify _____).	\$ _____	\$ _____
Total	\$510,950,000	\$510,950,000

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	Aggregate Dollar Amount of Purchases
Accredited Investors	480	\$510,950,000
Non-accredited Investors	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	Dollar Amount Sold
Rule 505		\$ _____
Regulation A		\$ _____
Rule 504		\$ _____
Total		\$ _____

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.

Transfer Agent's Fees	<input type="checkbox"/>	\$ _____
Printing and Engraving Costs	<input checked="" type="checkbox"/>	\$110,950
Legal Fees	<input checked="" type="checkbox"/>	\$443,800
Accounting Fees	<input checked="" type="checkbox"/>	\$22,190
Engineering Fees	<input type="checkbox"/>	\$ _____
Sales Commissions (specify finders' fees separately)	<input checked="" type="checkbox"/>	\$0*
Other Expenses (identify) <u>Consultants, information technology, and salaries</u>	<input checked="" type="checkbox"/>	\$110,950
Total	<input checked="" type="checkbox"/>	\$687,890

* Placement fees in an aggregate amount of \$3,591,750.00 have been paid separately by certain investors that have purchased securities in this offering. Such fees are not expenses of the issuer.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses in response to Part C – Question 4.a. This difference is the “adjusted gross proceeds to the issuer.”

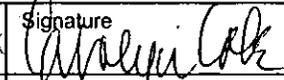
\$510,262,110

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.

		Payments to Officers, Directors & Affiliates		Payments To Others
Salaries and fees.....	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
Purchase of real estate.....	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
Purchase, rental or leasing and installation of machinery and equipment	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
Construction or leasing of plant buildings and facilities	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger).....	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
Repayment of indebtedness	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
Working capital.....	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
Other (specify): <u>Direct or indirect private equity investments.</u>	<input type="checkbox"/>	\$	<input checked="" type="checkbox"/>	\$510,262,110
.....	<input type="checkbox"/>	\$	<input type="checkbox"/>	\$
Column Totals	<input type="checkbox"/>	\$	<input checked="" type="checkbox"/>	\$510,262,110
Total Payments Listed (column totals added)			<input checked="" type="checkbox"/>	\$510,262,110

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) Citigroup Capital Partners II Onshore, L.P.	Signature 	Date December 21, 2006
Name of Signer (Print or Type) Carolyn Cole	Title of Signer (Print or Type) Vice President, Citigroup Private Equity LP, general partner of the issuer	

ATTENTION

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