| SEC For | m 5 | | | | | | | | | | | | | | | | |
|--|---|--|---|---|--|-----|--|-------|---|---|--------------------------------|---|--|--|----------------------|--|--|
| | | | | ATES SE | TES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | | | | |
| Instruction 1(b). | | | | | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | | | | | | | | | OMB APPROVAL OMB Number: 3235-0362 Estimated average burden hours per response: 1.0 | | | |
| | Holdings Repo | | Fil | | l pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | | | |
| 1. Name and Address of Reporting Person [*] Ripley Jay | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>Global Partner Acquisition Corp II</u> [GPAC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| (Last) (First) (Middle) C/O GLOBAL PARTNER ACQUISITION CORP II | | | | | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021 | | | | | | | | Officer (give title Other (specify below) below) | | | | |
| 7 RYE RIDGE PLAZA, SUITE 350 (Street) RYE BROOK, NY 10573 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (City) | = | | | | | | | | | Person | | | | | | | |
| 1. Title of Security (Instr. 3) Date (Month/Day/Year) | | | | 2A. Deemed Execution D if any | 2A. Deemed Execution Date, if any | | 3. Transaction Code (Instr. | | ed, Disposed of, or Benef 4. Securities Acquired (A) or Dispo (D) (Instr. 3, 4 and 5) | | | ed Of 5. Amount of Securities Beneficially | | of ly | 6. Owner Form: | ship Ind Direct Be | lature of irect neficial |
| | | | | (Month/Day/Year) | | 8) | | Amo | unt | (A) or (D) Price | | | Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | | | | Ownership (Instr. 4) |
| | | Т | able II - Deriva (e.g., j | ative Secu outs, calls | | | | , | • | ' | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amo or Num of Shai | ber | | | | | |
| Footnote ⁽¹⁾ | (1) | | | 3 | | | (1) | | (1) | Footnot | e ⁽¹⁾ (1 | .) | | 0 ⁽¹ | 1) | I ⁽¹⁾ | Footnote ⁽¹⁾ |

Explanation of Responses:

1. The reporting person has an indirect pecuniary interest in Class B Ordinary Shares, par value \$0.0001 per share, of Global Partner Acquisition Corp II (the "Issuer") through the reporting person's membership interest in Global Partner Sponsor II LLC (the "Sponsor"), over which the reporting person has neither voting nor dispositive control.

<u>/s/ John F. Ripley</u>

** Signature of Reporting Person Date

02/14/2022

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

 \ast 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.