

ANNUAL FINANCIAL REPORT  
ON SBA FORM 468  
(PARTNERSHIP SBICs)

OMB Approval No 3245-0063  
Expiration Date mm/dd/yyyy

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NAME OF LICENSEE:

---

LICENSE NUMBER:

---

STREET ADDRESS:

---

CITY, STATE, AND ZIP CODE

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COUNTY:

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EMPLOYER ID NUMBER:

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FOR THE REPORTING PERIOD ENDED:

MONTHS:

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A - FUND FOCUS

B - OWNERSHIP

C - FUND IRR  
(for SBICs licensed on or after January 1, 1994)

Net IRR: \_\_\_\_

Gross IRR: \_\_\_\_

Please Note: The estimated burden for completing this form is 20 hours per response. You will not be required to respond to this information collection if a valid OMB approval number is not displayed. If you have questions or comments concerning this estimate or other aspects of this information collection, please contact the US Small Business Administration, Chief Administrative Information Branch, Washington, D.C. 20416 and/or Office of Management and Budget, Clearance Officer, Paperwork Reduction Project (3425-0063), Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB

STATEMENT OF FINANCIAL POSITION  
AS OF \_\_\_\_\_  
(Amounts rounded to nearest dollar)

OMB Approval No. 3245-0063  
Expiration Date mm/dd/yyyy

Name of Licensee: Name of Licensee

License No.: 00/00-0000

**ASSETS**

<u>LOANS AND INVESTMENTS:</u>	<u>COST</u>	<u>UNREALIZED DEPRECIATION</u>	<u>UNREALIZED APPRECIATION</u>	<u>VALUE (1)</u>
	(Col. 1)	(Col. 2)	(Col. 3)	(Col. 4)
<u>Portfolio Securities:</u>				
1 Loans	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2 Debt Securities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3 Equity Securities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>4 TOTAL PORTFOLIO SECURITIES</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<u>Assets Acquired in Liquidation of Portfolio Securities:</u>				
5 Receivables from Sale of Assets Acquired	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6 Assets Acquired	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>7 TOTAL ASSETS ACQUIRED</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8 Operating Concerns Acquired	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9 Notes and Other Securities Received	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>10 TOTAL LOANS AND INVESTMENTS</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11 Less Current Maturities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12 Loans and Investments Net of Current Maturities	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<u>Investment in 301(d) Licensee (2):</u>				
13 Name <input style="width: 300px;" type="text"/>				<input type="text"/>
License No. <input style="width: 100px;" type="text"/>				
<b>CURRENT ASSETS</b>				
14 Cash and Cash Equivalents		<input type="text"/>		
15 Invested Idle Funds			<input type="text"/>	
16 Interest and Dividends Receivable		<input type="text"/>		
17 Notes and Accounts Receivable		<input type="text"/>		
18 Receivables from Parent or Other Associates		<input type="text"/>		
19 Less: Allowance for Losses (lines 16, 17 and 18)			<input type="text"/>	
20 Current Maturities of Portfolio Securities		<input type="text"/>		
21 Current Maturities of Assets Acquired		<input type="text"/>		
22 Current Maturities of Operating Concerns Acquired		<input type="text"/>		
23 Current Maturities of Other Securities		<input type="text"/>	<input type="text"/>	
24 Other (specify) <input style="width: 300px;" type="text"/>			<input type="text"/>	
25 Other (specify) <input style="width: 300px;" type="text"/>			<input type="text"/>	<input type="text"/>
<b>OTHER ASSETS</b>				
26 Net Furniture and Equipment			<input type="text"/>	
27 Net Leverage Fees			<input type="text"/>	
28 Other (specify) <input style="width: 300px;" type="text"/>			<input type="text"/>	
29 Other (specify) <input style="width: 300px;" type="text"/>			<input type="text"/>	<input type="text"/>
<b>30 TOTAL ASSETS</b>				<input type="text"/>

(1) Column Headings apply to items 1 through 12 only. (Cost - Unrealized Depreciation + Unrealized Appreciation = Value)  
(2) Note to item 13 should include percent owned, cost basis and changes resulting from equity method of accounting.

STATEMENT OF FINANCIAL POSITION  
AS OF \_\_\_\_\_  
(Amounts rounded to nearest dollar)

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Name of Licensee: Name of Licensee

License No.: 00/00-0000

**LIABILITIES AND CAPITAL**

**LONG-TERM DEBT**

31 Notes and Debentures Payable to or Guaranteed by SBA		[ ]		
32 Notes and Debentures Payable to Others		[ ]		
33 a. Participating Securities Held or Guaranteed by SBA	[ ]			
b. Earned Prioritized Payments Allocated for Distribution	[ ]			
c. SBA Profit Participation Allocated for Distribution	[ ]	[ ]		[ ]

**CURRENT LIABILITIES**

34 Accounts Payable		[ ]		
35 Due to Parent or Other Associates				
a. Management Expenses Due to Associates	[ ]			
b. Other Due to Associates	[ ]	[ ]		
36 Accrued Interest Payable		[ ]		
37 Accrued Taxes Payable		[ ]		
38 Distributions Payable		[ ]		
39 Short-term Notes Payable/Lines of Credit		[ ]		
40 Other (specify) [ ]		[ ]		
41 Other (specify) [ ]		[ ]		[ ]

**OTHER LIABILITIES**

42 Deferred Credits		[ ]		
43 Other (specify) [ ]		[ ]		
44 Other (specify) [ ]		[ ]		[ ]
<b>45 TOTAL LIABILITIES</b>				[ ]

**PARTNERS' CAPITAL**

46 Private Partners' Contributed Capital:				
a. General Partner(s)	[ ]			
b. Limited Partner(s)	[ ]	[ ]		
47 Other (specify) [ ]		[ ]		
48 Unrealized Gain (Loss) on Securities Held		[ ]		
49 Non-Cash Gains/Income	[ ]			
50 Undistributed Net Realized Earnings (Partners' Earned Capital)	[ ]			
51 Undistributed Realized Earnings (line 49 plus line 50)		[ ]		
<b>52 TOTAL PARTNERS' CAPITAL</b>				[ ]
<b>53 TOTAL LIABILITIES AND PARTNERS' CAPITAL</b>				[ ]

STATEMENT OF OPERATIONS REALIZED  
FOR MONTHS ENDED

OMB Approval No. 3245-0063  
Expiration Date mm/dd/yyyy

(Amounts rounded to nearest dollar)

Name of Licensee:	License No.:
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**INVESTMENT INCOME**

1 Interest Income			
2 Dividend Income			
3 Income (Loss) from Investments in Partnerships/Flow-through Entities			
4 Income (Loss) from Investment in Section 301(d) Licensee			
5 Fees for Management Services			
6 Application, Closing and Other Fees			
7 Interest on Cash Equivalents and Invested Idle Funds			
8 Income from Assets Acquired in Liquidation of Loans and Investments (net of \$ Expenses)			
9 Other Income			
<b>10 GROSS INVESTMENT INCOME</b>			

**EXPENSES**

11 Interest Expense			
a. Interest Expense -- Earned Prioritized Payments, Changes & Adjustments			
b. Interest Expense -- SBA Debentures			
c. Other Interest Expense			
12 Commitment Fees & Other Financial Costs			
13 Compensation and Benefits (Partner and Employee)			
14 Investment Advisory and Management Services			
15 Partners' Meetings			
16 Appraisal and Investigation			
17 Advertising, Communication and Travel			
18 Cost of Space Occupied			
19 Depreciation and Amortization			
a. Amortization of Leverage Fees			
b. Other Depreciation and Amortization.			
20 Insurance			
21 Payroll and Other Taxes			
22 Provision for Losses on Receivables (excluding loans receivable)			
23 Legal Fees			
24 Audit and Examination Fees			
25 Miscellaneous Expenses (attach schedule)			
a. Misc. #1			
b. Misc. #2			
c. Misc. #3			
d. Misc. #4			
e. Misc. #5			
f. Misc. #6			
<b>26 TOTAL EXPENSES</b>			
<b>27 NET INVESTMENT INCOME (LOSS)</b>			
<b>28 NET REALIZED GAIN (LOSS) ON INVESTMENTS (1)</b>			
<b>29 NET INCOME (LOSS) BEFORE NONRECURRING ITEMS</b>			
30 Extraordinary Item			
31 Cumulative Effect of Change in Accounting Principle			
<b>32 NET INCOME (LOSS)</b>			

(1) Provide supporting detail for all realized gains and losses on Page 13P of this form.

STATEMENT OF CASH FLOWS  
 FOR MONTHS ENDED  
 (page 1 of 2)  
 (Amounts rounded to nearest dollar)

OMB Approval No. 3245-0063  
 Expiration Date mm/dd/yyyy

Name of Licensee:	License No.:
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**OPERATING ACTIVITIES:**

**Cash Inflows:**

1 Interest Received from Portfolio Concerns		
2 Dividends Received from Portfolio Concerns		
3 Other Income Received from Portfolio Concerns		
4 Management Services and Other Fees Received		
5 Interest on Cash Equivalents and Invested Idle Funds		
6 Cash Received from Assets Acquired in Liquidation		
7 Other Operating Cash Receipts		
<b>Cash Outflows:</b>		
8 Interest Paid (excluding Earned Prioritized Payments, Charges, and Adjustments)		
9 Commitment Fees and Other Financial Costs		
10 Investment Advisory and Management Fees		
11 Partners' and Employees' Compensation and Benefits		
12 Operating Expenditures (excluding compensation and benefits)		
13 Other Operating Cash Disbursements		
<b>14 NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES</b>		

**INVESTING ACTIVITIES:**

**Cash Inflows:**

15 Loan Principal Payments Received from Portfolio Concerns		
16 Returns of Capital Received from Portfolio Concerns		
17 Net Proceeds from Disposition of Portfolio Securities		
18 Liquidation of Idle Funds Investments		
19 Other (Specify) <input style="width: 400px;" type="text"/>		
<b>Cash Outflows:</b>		
20 Purchase of Portfolio Securities		
21 Loans to Portfolio Concerns		
22 Idle Funds Investments		
23 Other (Specify) <input style="width: 400px;" type="text"/>		
<b>24 NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES</b>		

**FINANCING ACTIVITIES:**

**Cash Inflows:**

25 Proceeds from Issuance of SBA-Guaranteed Debentures		
26 Proceeds from Issuance of Participating Securities		
27 Proceeds from Non-SBA Borrowing		
28 Partners' Capital Contribution		
29 Other (Specify) <input style="width: 400px;" type="text"/>		
<b>Cash Outflows:</b>		
30 SBA Leverage Fees		
31 Principal Payments on SBA-Guaranteed Debentures		
32 Principal Payments on Non-SBA Borrowing		
33 Redemption of Participating Securities		
34 Redemption of Private Partnership Interests		
35 Prioritized Payments, Charges and Adjustments Paid		
36 SBA Profit Participation Paid		
37 Other Distributions Paid		
38 Other (Specify) <input style="width: 400px;" type="text"/>		
<b>39 NET CASH PROVIDED BY (USED IN) FINANCING ACTIVITIES</b>		

STATEMENT OF CASH FLOWS  
 FOR MONTHS ENDED  
 (page 2 of 2)  
 (Amount rounded to nearest dollar)

OMB Approval No. 3245-0063  
 Expiration Date mm/dd/yyyy

Name of Licensee:	License No.:
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41 INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	
42 CASH AND CASH EQUIVALENTS AT BEGINNING OF PERIOD	
43 CASH AND CASH EQUIVALENTS AT END OF PERIOD (line 14, page 2P)	

**RECONCILIATION OF NET INCOME (LOSS) TO NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES:**

44 Net Income (Loss) (line 32, page 4P)	
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**Adjustments to Reconcile Net Income (Loss) to Net Cash Provided By (Used in) Operating Activities:**

45 Depreciation and Amortization (line 19, page 4P)	
46 Provision for Losses on Accounts Receivable (line 22, page 4P)	
47 Earned Prioritized Payments, Charges, and Adjustments	
48 Realized (Gains) Losses on Investments (line 28, page 4P)	
49 Other (Specify) <input style="width: 400px;" type="text"/>	

**Changes in Operating Assets and Liabilities Net of Noncash Items:**

50 (Increase) Decrease in Interest and Dividends Receivable	
51 (Increase) Decrease in Other Current Assets	
52 Increase (Decrease) in Accounts Payable	
53 Increase (Decrease) in Accrued Interest Payable	
54 Increase (Decrease) in Accrued Taxes Payable	
55 Increase (Decrease) in Distributions Payable	
56 Increase (Decrease) in Other Current Liabilities	
57 Other (Specify) <input style="width: 400px;" type="text"/>	
58 Other (Specify) <input style="width: 400px;" type="text"/>	

59 NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES (total must agree with line 14, page 5P)	
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Supplemental disclosure of non-cash financing and investing activities may be required. See FASB Statement No. 95, paragraph 32.

STATEMENT OF PARTNERS' CAPITAL  
AS OF  
(page 1 of 2)  
(Amount rounded to nearest dollar)

OMB Approval No. 3245-0063  
Expiration Date mm/dd/yyyy

Name of Licensee:

License No.:

**PART I. PRIVATE PARTNERS' CONTRIBUTED CAPITAL**

	<u>GENERAL PARTNER(S)</u> <small>(page 3P, line 48a)</small>	<u>LIMITED PARTNER(S)</u> <small>(page 3P, line 48b)</small>	<u>TOTAL</u>
<b>1 BALANCE AT BEGINNING OF PERIOD</b>			
<b>2 ADDITIONS:</b>			
a. Partnership interests issued for cash			
b. Partnership interests issued for services rendered			
c. Partnership interests issued for non-cash assets			
d. Capitalization of Retained Earnings Available for Distribution			
e. Other credits (specify) _____			
<b>3 Total additions (sum of 2a through 2e)</b>			
<b>4 Subtotal (line 1 plus line 3)</b>			
<b>5 DEDUCTIONS:</b>			
a. Liquidation of partnership interests			
b. Other debits (specify) _____			
<b>6 Total deductions (sum of 5a through 5d)</b>			
<b>7 BALANCE AT END OF PERIOD (line 4 minus line 6)-- total must agree with lines 46a and 46b, page 3P</b>			

**PART II. UNDISTRIBUTED REALIZED EARNINGS**

	<u>NON-CASH GAINS/ INCOME</u> <small>(1)</small>	<u>UNDISTRIBUTED NET REALIZED EARNINGS</u> <small>(2)</small>	<u>UNDISTRIBUTED REALIZED EARNINGS</u> <small>(1)+(2)</small>
<b>1 BALANCE AT BEGINNING OF PERIOD</b>			
<b>2 ADDITIONS:</b>			
a. Net investment income			
b. Interest Expense -- Earned Prioritized Payments, Charges & Adjustments (line 11a, page 4P)			
c. Realized gain (loss) on investments			
d. Gain on appreciation of securities distributed in kind			
e. Other (specify) _____			
<b>3 Total additions (sum of 2a through 2e)</b>			
<b>4 Subtotal (line 1 plus line 3)</b>			
<b>5 DEDUCTIONS:</b>			
a. Cash Distributions			
b. Distributions allocated but not paid			
c. In-Kind Distributions (at fair value)			
d. Capitalization of Retained Earnings Available for Distribution			
e. Other (specify) _____			
<b>6 Total deductions (sum of 5a through 5e)</b>			
<b>7 Total before collection of non-cash gains/income(line 4 minus line 6)</b>			
<b>8 Collection of non-cash gains/income</b>			
<b>9 BALANCE AT END OF PERIOD (line 7 plus line 8)-- totals must agree with lines 49, 50, and 51, page 3P</b>			



I. RETAINED EARNINGS AVAILABLE FOR DISTRIBUTION  
 II. REGULATORY AND LEVERAGEABLE CAPITAL  
 AS OF

OMB Approval No. 3245-0063  
 Expiration Date mm/dd/yyyy

(Amounts rounded to nearest dollar)

Name of Licensee:

License No.:

**PART I. RETAINED EARNINGS AVAILABLE FOR DISTRIBUTION OR CAPITALIZATION**

- 1 Undistributed Net Realized Earnings (line 50, page 3P)
- 2 LESS: Unrealized Depreciation (line 10, column 2, page 2P)
- 3 **RETAINED EARNINGS AVAILABLE FOR DISTRIBUTION OR CAPITALIZATION**

**PART II. SCHEDULE OF REGULATORY AND LEVERAGEABLE CAPITAL**

- 1 Private Partners' Contributed Capital (line 46, page 3P)
- 2 ADD:
  - a. Unfunded binding commitments from Institutional Investors
  - b. Waived management fees credited as capital contributions
- 3 LESS: Regulatory Deductions
  - a. Organization Expenses Not Approved by SBA (1)
  - b. Partnership Interests Issued for Services
  - c. Partnership Interests Issued for Non-cash Assets (unless approved by SBA for inclusion in Regulatory Capital or converted to cash)
  - d. Other (specify)
- 4 Total Regulatory Deductions (Sum of 3a through 3d)
- 5 Other Adjustments (specify)
- 6 **REGULATORY CAPITAL (sum of lines 1, 2, 4, and 5)**
- 7 LESS: Unfunded binding commitments from Institutional Investors
- 8 LESS: Non-cash assets included in Regulatory Capital, other than eligible investments in Small Concerns
- 9 LESS: Other deductions (specify)
- 10 **LEVERAGEABLE CAPITAL (sum of lines 6 through 9)**

**PART IIa. ADJUSTMENT TO REGULATORY CAPITAL FOR OVERLINE PURPOSES**

COMPLETE THIS PART IIa ONLY IF LICENSEE WISHES TO INCREASE ITS OVERLINE LIMITATION BY THE AMOUNT OF ITS NET UNREALIZED GAINS ON MARKETABLE SECURITIES PURSUANT TO 13 CFR 107.740 (c).  
 NOTE: Licensee must have positive Retained Earnings Available for Distribution at the time the increased overline limit is established.

- 11 **REGULATORY CAPITAL (Part II, line 6)**
- 12 ADD: Net Unrealized Gains on Marketable Securities (2)
- 13 **ADJUSTED REGULATORY CAPITAL FOR OVERLINE PURPOSES (line 11 plus line 12)**

**PART III. CUMULATIVE PRIVATE INVESTOR CAPITAL CONTRIBUTIONS & DISTRIBUTIONS**

(for SBICs licensed on or after January 1, 1994)

- 14 All Private Capital Contributions Ever Paid-In
- 15 All Distributions to Private Investors Ever Paid Out -- Including Fair Market Value of Non-Cash Distributions

**NOTES**

- (1) Deduct only those organizational expenses which were not accepted as reasonable by SBA.
- (2) As defined in 13 CFR 107.740(c). Attach a schedule showing the following for each marketable security: name of Small Business Concern, Market in which traded, names of market makers for companies not listed on a stock exchange or NASDAQ, class of security, cost, valuation, and unrealized gain or loss in accordance with the requirements of Section 107.740(c).



SCHEDULE OF COMMITMENTS  
AS OF

OMB Approval No. 3245-0063  
Expiration Date mm/dd/yyyy

Name of Licensee					License No	
1	2	3	4	5	6	7
Name of Small Business	Employer ID	Amount of Commitment	Date Made	Expiration Date	Loan, Debt, or Equity?	New investment or follow-on?
TOTAL						

SCHEDULE OF GUARANTEES  
AS OF

OMB Approval No. 3245-0063  
Expiration Date mm/dd/yyyy

Name of Licensee						License No
1	2	3	4	5	6	7
Name of Small Business / Employer ID	Guarantee Amount	Date Made	Expiration Date	Name of Guaranteed Party	Is guarantee collateralized? If so, by what?	Description of underlying obligation of Small Business
TOTAL						

**SCHEDULE 1**

**SCHEDULE OF LOANS AND INVESTMENTS  
AS OF**

OMB Approval No. 3245-0063  
Expiration Date mm/dd/yyyy

Name of Licensee: \_\_\_\_\_ License No 00/00-0000

Portfolio Company Name	Employer ID	% Own	% Vote	Cost at End of Period	Unrealized App (Dep)	Total Reported Value
------------------------	-------------	-------	--------	-----------------------	----------------------	----------------------

Name of Small Business Concern	00-0000000					
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1st Date Invested: \_\_\_\_\_ Overline?: \_\_\_\_\_  
 Current stage of company: \_\_\_\_\_ IRR: \_\_\_\_\_  
 Exchange: \_\_\_\_\_ Stock Symbol: \_\_\_\_\_ (equity only)  
 NAICS: \_\_\_\_\_  
 If portfolio company's name changed through merger/acquisition or otherwise,  
 company name of original investment: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State: \_\_\_\_\_  
 Zip Code: \_\_\_\_\_ LMI: \_\_\_\_\_  
 Portfolio company comments:  
 \_\_\_\_\_

<u>Portfolio Company Financial Condition (Unaudited)</u>			
	<u>Latest FY End</u>	<u>1 Yr Ago</u>	<u>2 Yrs Ago</u>
As of Date:	12/31/2006	12/31/2005	12/31/2004
Revenues:			
EBITDA:			
Net Income:			
Cashflow from Operations:			
Cash Quarterly Burn Rate:			
Cash Balance:			
Debt:			
EOY Equity Value (Fair Market):			
EOY Enterprise Value:			
Full-time equivalent employees:			
Federal income taxes paid:			
State income taxes paid:			

<u>Portfolio Company Financing Rounds</u>						
Date Closed	Security Issued	Post-Money Val (\$M)	Total Round Size (\$M)	SBIC's Part (\$M)	Liquidation Preference (if Any)	Co-investors in Round:

<u>Loans and Investments (ordered by date ascending)</u>																																
Investment Date	Investment Type	Initial Invest. Amount	Cost at Beg. of Period	Additions/ (Deductions)	Description of Addition/Deduction	Cost at End of Period	Unrealized App (Dep)	Reported Value																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;"><b>Other Notes:</b></td> <td>Qualifies as start-up per CFR 107.50: _____</td> <td style="width:20%;"><b>Class I Appreciation Amount:</b></td> <td>_____</td> </tr> <tr> <td><b>Smaller Concern?</b></td> <td>Equity Capital? _____</td> <td><b>Class II Appreciation Amount:</b></td> <td>_____</td> </tr> <tr> <td><b>Comments:</b></td> <td>_____</td> <td><b>If Class II, Date of Up Round?:</b></td> <td>_____</td> </tr> </table>						<b>Other Notes:</b>	Qualifies as start-up per CFR 107.50: _____	<b>Class I Appreciation Amount:</b>	_____	<b>Smaller Concern?</b>	Equity Capital? _____	<b>Class II Appreciation Amount:</b>	_____	<b>Comments:</b>	_____	<b>If Class II, Date of Up Round?:</b>	_____	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>Loan/Debt Information</b></td> <td style="text-align: right;"><b>Delinquent?</b></td> </tr> <tr> <td><b>Maturity Date:</b></td> <td>_____</td> <td style="text-align: right;"><b>Interest Rate:</b></td> </tr> <tr> <td><b>Repay. Terms:</b></td> <td>_____</td> <td>_____</td> </tr> <tr> <td><b>Collateral:</b></td> <td colspan="2">_____</td> </tr> </table>			<b>Loan/Debt Information</b>		<b>Delinquent?</b>	<b>Maturity Date:</b>	_____	<b>Interest Rate:</b>	<b>Repay. Terms:</b>	_____	_____	<b>Collateral:</b>	_____	
<b>Other Notes:</b>	Qualifies as start-up per CFR 107.50: _____	<b>Class I Appreciation Amount:</b>	_____																													
<b>Smaller Concern?</b>	Equity Capital? _____	<b>Class II Appreciation Amount:</b>	_____																													
<b>Comments:</b>	_____	<b>If Class II, Date of Up Round?:</b>	_____																													
<b>Loan/Debt Information</b>		<b>Delinquent?</b>																														
<b>Maturity Date:</b>	_____	<b>Interest Rate:</b>																														
<b>Repay. Terms:</b>	_____	_____																														
<b>Collateral:</b>	_____																															
<b>Equity Information</b>		<b>Number of Shares:</b>																														
<b>Type of Shares:</b>		<b>Market/Liquidity:</b>																														
<b>Equity Features:</b>																																

Name of Licensee

License No

**1 A. SUMMARY OF LOANS AND INVESTMENTS**

1	2	3	4	5	6
Investment Category	Cost at Beginning of Period	Additions/ (Deductions)	Cost at End of Period	Unrealized Appreciation (Depreciation)	Reported Value
TOTAL LOANS (line 1, page 2P)					
TOTAL DEBT SECURITIES (line 2, page 2P)					
TOTAL EQUITY SECURITIES (line 3, page 2P)					
<b>TOTAL PORTFOLIO SECURITIES (line 4, page 2P)</b>					
TOTAL ASSETS ACQUIRED (line 7, page 2P)					
TOTAL OPERATING CONCERNS ACQUIRED (line 8, page 2P)					
TOTAL NOTES AND OTHER SECS. RECEIVED (line 9, page 2P)					
<b>TOTAL LOANS AND INVESTMENTS (line 10, page 2P)</b>					
<b>1 B. SUMMARY OF EQUITY CAPITAL INVESTMENTS</b>					

**1 C. SMALLER ENTERPRISE FINANCINGS**

- 1 Cumulative dollar amount of Smaller Enterprise Financings extended between April 25, 1994 and close of reporting fiscal year.
- 2 Cumulative dollar amount of all Financings extended between April 25, 1994 and close of reporting fiscal year.
- 3 Percentage of total Financings extended to Smaller Enterprises (line 1 divided by line 2)

SEE 13 CFR 107.710 FOR PERCENTAGE OF TOTAL FINANCINGS WHICH MUST BE IN SMALLER ENTERPRISES.

SCHEDULE 2

SCHEDULE OF REALIZED GAINS AND  
LOSSES ON LOANS AND INVESTMENTS  
FOR \_\_\_\_\_ MONTHS ENDED \_\_\_\_\_

OMB Approval No. 3245-0063  
Expiration Date mm/dd/yyyy

Name of Licensee \_\_\_\_\_

License No. \_\_\_\_\_

1	2	3	4	5	6	7	8	9	10
Name of Small Business / Employer ID	Security Type (1)	Transaction Type (2) / Date	Net Sales Price	Cost	Realized Gains/ (Loss)	Components of Net Sales Price			Name and Address of Purchaser (applies to sales and exchanges)
						Cash	Note / Maturity Date	Equity / Type	
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
						Escrow Expires: _____			_____
TOTAL									

(1) Security Type: L = Loans, D = Debt, E = Equity, AA = Assets Acquired, OC = Operating concerns acquired, NS = Notes and Other Securities Received

(2) Transaction Type: S = Sale, E = Exchange, C = Charge-off D = Distribution of Securities

Name of Licensee						License No
1	2	3	4	5	6	7
Name of Small Business / Employer ID	Description of Non-cash Gains/Income (1)	Balance at Beginning of Period	Additions	Collections During Period	Balance at End of Period	Amount of "Includible Non-cash Gain" for Capital Impairment
TOTAL						

(1) Examples of non-cash gains and income include the following:

- Non-cash gains on sale or exchange of securities
- Interest income accrued on deferred interest notes, zero coupon bonds or similar instruments
- Dividends received in kind
- Accrued interest converted into a new note or added to principal of an existing note. The amount of any such interest which was previously included in Undistributed Net Realized Earnings must be reclassified to Non-cash Gains/Income.



SCHEDULE OF DELINQUENT LOANS AND INVESTMENTS  
AS OF

Name of Licensee										License No
1	2	3	4	5	6	7	8	9	10	11
Name of Small Business / Employer ID	Outstanding Principal Balance	Delinquent Principal:		Delinquent Interest:		Date of Last Payment		Amount of Last Payment		Fair Market Value of Collateral
		Amount Past Due	Days Past Due (1)	Amount Past Due	Days Past Due (1)	Principal	Interest	Principal	Interest	
<b>TOTAL</b>										

(1) Based on oldest delinquency.

Name of Licensee	License No
------------------	------------

**COMPLETE SCHEDULE ONLY IF LICENSEE HAS, OR PLANS TO APPLY FOR, SBA LEVERAGE**

**I. U.S. GOVERNMENT OBLIGATIONS (direct or guaranteed)**

Description	Maturity Date	Amount

**II. REPURCHASE AGREEMENTS WITH FEDERALLY-INSURED INSTITUTION**

Name and Location of Financial Institution	Maturity Date	Amount

**III. CERTIFICATES OF DEPOSIT ISSUED BY FEDERALLY - INSURED INSTITUTIONS**

Name and Location of Financial Institution	Maturity Date	Amount

**IV. DEMAND DEPOSIT, MONEY MARKET, AND SAVINGS ACCOUNTS IN FEDERALLY - INSURED INSTITUTIONS**

Name and Location of Financial Institution	Description	Amount

**V. OTHER CASH AND INVESTED IDLE FUNDS**

Description	Maturity Date (if applicable)	Amount

**TOTAL CASH, CASH EQUIVALENTS AND IDLE FUNDS**  
(total must agree with sum of lines 14 and 15, page 2P)

--

Name of Licensee:

License No.:

**PART I. FIRST ACTIVITY TEST**

- |   |                      |
|---|----------------------|
| 1. Cash and Cash Equivalents (line 14, page 2P)             | <input type="text"/> |
| 2. Invested Idle Funds (line 15, line 2P)                   | <input type="text"/> |
| 3. Total Cash and Idle Funds                                | <input type="text"/> |
| 4. Total Assets at Cost:                                    |                      |
| a. Total Assets (line 30, page 2P)                          | <input type="text"/> |
| b. ADD: Unrealized Depreciation (line 10, col. 2, page 2P)  | <input type="text"/> |
| c. LESS: Unrealized Appreciation (line 10, col. 3, page 2P) | <input type="text"/> |
| d. Total Assets at Cost                                     | <input type="text"/> |
| 5. Line 3 Divided by Line 4d (expressed as a percentage)    | <input type="text"/> |

IF LINE 5 IS LESS THAN OR EQUAL TO 20 PERCENT, LICENSEE IS NOT INACTIVE--DO NOT COMPLETE PART II

IF LINE 5 IS GREATER THAN 20%, COMPLETE THE SECOND ACTIVITY TEST IN PART II

**PART II. SECOND ACTIVITY TEST**

- |   |                      |
|---|----------------------|
| 6. Financings during the Past 18 Months:                |                      |
| a. Loans  | <input type="text"/> |
| b. Debt   | <input type="text"/> |
| c. Equity   | <input type="text"/> |
| d. Guarantees   | <input type="text"/> |
| 7. Total (lines 6a through 6d)                          | <input type="text"/> |
| 8. Regulatory Capital                                   | <input type="text"/> |
| 9. Line 7 divided by Line 8 (expressed as a percentage) | <input type="text"/> |

IF LINE 9 IS LESS THAN 20%, LICENSEE MAY BE INACTIVE UNDER SECTION 107.590-  
ATTACH EXPLANATION OF INACTIVITY AND PLANNED CORRECTIVE ACTION.

Name of Licensee				License No	
1	2	3	4	5	
Name and Address	General Partner/ Limited Partner/ Manager -- give exact title(s)	Are partnership interests legally owned, beneficially owned, or	Number of Partnership Units Owned	Percent Owned or Controlled	
				Beginning of Period	End of Period

**Instructions**

Any Licensee, which has SBA leverage outstanding or which expects to apply for leverage in the current fiscal year, must prepare an annual update of its plan of operations. The update must be submitted to SBA as an addendum to the Licensee's Annual Financial Report on Form 468. SBA will consider the information provided as part of its evaluation of the financial soundness of the Licensee, in accordance with the provisions of Section 406 of the Small Business Equity Enhancement Act.

The plan update must include analysis and discussion of key events of the past year, as well as expectations for the current year. SBA expects that most Licensees will be able to provide the required information in a narrative of no more than 3 pages.

**Content of Report**

1. For the fiscal year ended, the Licensee should discuss the following:
  - a. Major positive and negative events which affected overall performance during the year, including any portfolio exits/distributions/write-offs; highlight any significant differences between last year's plan and actual performance
  - b. Any significant changes in the operations of the Licensee, such as changes in organizational structure, scope of operations, level or phase of investment activity, or types of investments being made
  - c. Any management changes
  - d. Any lawsuits or other events giving rise to contingent liabilities
2. For the current fiscal year, the Licensee should discuss the following:
  - a. Levels of new and follow-on investment anticipated
  - b. Anticipated exits/distributions/write-offs from investments
  - c. Any material changes expected in investment strategy or portfolio composition
  - d. Any material changes expected in overhead expenditures
  - e. Any changes expected in management
  - f. Any other anticipated events which may have a significant effect on Licensee's performance

# CERTIFICATIONS

OMB Approval No. 3245-0063  
Expiration Date mm/dd/yyyy

Name of Licensee

License No

I, [ \_\_\_\_\_, a General Partner of \_\_\_\_\_ (Licensee),]  
[ \_\_\_\_\_, a General Partner of \_\_\_\_\_, the General Partner of  
\_\_\_\_\_ (Licensee), ]  
[ \_\_\_\_\_, a Managing Member of \_\_\_\_\_,  
the General Partner of \_\_\_\_\_ (Licensee), ]  
[ \_\_\_\_\_, the President of \_\_\_\_\_,  
the General Partner of \_\_\_\_\_ (Licensee), ] do hereby certify as follows

1. The audited Annual Financial Report for the fiscal year ended \_\_\_\_\_ submitted by \_\_\_\_\_ (Licensee) to the Small Business Administration on SBA Form 468 is true and correct in all respects. The statements and schedules listed below have been omitted from the submission.
2. The General Partner of \_\_\_\_\_ (Licensee) has reviewed and approved the audited Annual Financial Report of such company for the fiscal year ended \_\_\_\_\_.
3. \_\_\_\_\_ (Licensee) has filed all federal, state and local tax returns through the date hereof including but not limited to payroll tax returns and informational returns for income tax purposes.
4. \_\_\_\_\_ (Licensee) is in good standing under the laws of the State of \_\_\_\_\_.

**STATEMENTS AND SCHEDULES OMITTED:**

CAUTION: By signing below, you are certifying as to the truth and accuracy of the audited Annual Financial Report in all respects, and acknowledging that officials in the Small Business Administration (SBA) will be relying on this certification. Knowingly making a false statement to or concealing a material fact from the SBA can lead to imprisonment of up to 30 years and/or a fine of up to \$1,000,000 under 18 U.S.C. § 1014.

Date: \_\_\_\_\_ By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_