ANNUAL FINANCIAL REPORT ON SBA FORM 468

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

(PARTNERSHIP SBICs)

NAME OF LICENSEE:		
LICENSE NUMBER:		
STREET ADDRESS:		
CITY, STATE, AND ZIP CODE		
COUNTY:		
EMPLOYER ID NUMBER:		
FOR THE REPORTING PERIOD ENDED:	MONTHS:	
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

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

- (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

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

(Amounts rounded to near	est dollar)
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)	
45 TOTAL LIABILITIES	
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)	
52 TOTAL PARTNERS' CAPITAL	
53 TOTAL LIABILITIES AND PARTNERS' CAPITAL	

STATEMENT OF OPERATIONS REALIZED OMB Approval No. 3245-0063 Expiration Date mm/dd/yyyy FOR MONTHS ENDED (Amounts rounded to nearest dollar) License No.: Name of Licensee: 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 10 GROSS INVESTMENT INCOME 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 26 TOTAL EXPENSES 27 NET INVESTMENT INCOME (LOSS) 28 NET REALIZED GAIN (LOSS) ON INVESTMENTS (1) 29 NET INCOME (LOSS) BEFORE NONRECURRING ITEMS 30 Extraordinary Item 31 Cumulative Effect of Change in Accounting Principle 32 NET INCOME (LOSS)

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

STATEMENT OF CASH FLOWS

OMB Approval No. 3245-0063

FOR MONTHS ENDED	Expiration Date mm/dd/yyyy
(page 1 of 2)	
(Amounts rounded to nearest dollar)	
(Amounts rounded to nearest dollar) Name of Licensee: License No.: PERATING ACTIVITIES: sh Inflows: Interest Received from Portfolio Concerns Dividends Received from Portfolio Concerns Other Income Received from Portfolio Concerns Management Services and Other Fees Received Interest on Cash Equivalents and Invested Idle Funds Cash Received from Assets Acquired in Liquidation Other Operating Cash Receipts sh Outflows: Interest Paid (excluding Earned Prioritized Payments, Charges, and Adjustments) Commitment Fees and Other Financial Costs Investment Advisory and Management Fees Partners' and Employees' Compensation and Benefits Operating Expenditures (excluding compensation and benefits) Other Operating Cash Disbursements NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES VESTING ACTIVITIES: th Inflows: Loan Principal Payments Received from Portfolio Concerns Net Proceeds from Disposition of Portfolio Securities Liquidation of Idle Funds Investments Other (Specify) sh Outflows: Purchase of Fortfolio Securities Loans to Portfolio Concerns Idle Funds Investments Other (Specify) NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES	License No.:
OPERATING ACTIVITIES:	
Cash Inflows:	
1 Interest Received from Portfolio Concerns	
3 Other Income Received from Portfolio Concerns	
•	
-	
7 Other Operating Cash Receipts	
Cash Outflows:	
9 Commitment Fees and Other Financial Costs	
13 Other Operating Cash Disbursements	
14 NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES	
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)	
Cash Outflows:	
20 Purchase of Portfolio Securities	
21 Loans to Portfolio Concerns	
22 Idle Funds Investments	
23 Other (Specify)	
24 NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES	
FINANCING ACTIVITIES:	
Cash Inflows:	
	<u> </u>
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· ·	<u> </u>
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	<u> </u>
39 NET CASH PROVIDED BY (USED IN) FINANCING ACTIVITIES	I

STATEMENT OF CASH FLOWS	OMB Approval No. 3245-0063
FOR MONTHS ENDED	Expiration Date mm/dd/yyyy
(page 2 of 2)	
(Amount rounded to nearest dollar)	
Name of Licensee:	License No.:
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)	
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)	
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)	
58 Other (Specify)	
59 NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES	

Supplemental disclosure of non-cash financing and investing activities may be required. See FASB Statement No. 95, paragraph 32.

(total must agree with line 14, page 5P)

STATEMENT OF PARTNERS' CAPITAL AS OF

(page 1 of 2)

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

(Amount rounded to nearest dollar)

Name of Licensee: License No.:

PART I. PRIVATE PARTNERS' CONTRIBUTED CAPITAL	GENERAL PARTNER(S) (page 3P, line 48a)	PARTNER(S)	TOTAL
1 BALANCE AT BEGINNING OF PERIOD	(page 3F, line 48a)	(page 3P, line 48b)	
2 ADDITIONS:			
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)	ì├───┤ .		
3 Total additions (sum of 2a through 2e)	' 		
4 Subtotal (line 1 plus line 3)			
5 DEDUCTIONS:			
a. Liquidation of partnership interests			
b. Other debits (specify)	1		
6 Total deductions (sum of 5a through 5d)	·		
•			
7 BALANCE AT END OF PERIOD (line 4 minus line 6)			
total must agree with lines 46a and 46b, page 3P			
PART II. UNDISTRIBUTED REALIZED EARNINGS	NON-CASH	UNDISTRIBUTED	UNDISTRIBUTED
	GAINS/	NET REALIZED	REALIZED
	INCOME	EARNINGS	EARNINGS
	(1)	(2)	(1)+(2)
1 BALANCE AT BEGINNING OF PERIOD			
2 ADDITIONS:			
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)			
3 Total additions (sum of 2a through 2e)			
4 Subtotal (line 1 plus line 3) 5 DEDUCTIONS:			
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)			
6 Total deductions (sum of 5a through 5e)			
7 Total before collection of non-cash gains/income(line 4 minus line 6)			
8 Collection of non-cash gains/income			
9 BALANCE AT END OF PERIOD (line 7 plus line 8) totals must agree with lines 49, 50, and 51, page 3P			

I. RETAINED EARNINGS AVAILABLE FOR DISTRIBUTION OMB Approval No. 3245-0063 II. REGULATORY AND LEVERAGEABLE CAPITAL 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 Private Partners' Contributed Capital (line 46, page 3P) a. Unfunded binding commitments from Institutional Investors Waived management fees credited as capital contributions 3 LESS: Regulatory Deductions 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 Deduct only those organizational expenses which were not accepted as reasonable by SBA. 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 nm/dd/yyyy

Name of Licensee					Lice	nse 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					

OMB Approval No. 3245-0063 SCHEDULE OF GUARANTEES AS OF Expiration Date nm/dd/yyyy Name of Licensee License No 5 2 3 4 6 Name of Expiration Name of Is guarantee collateralized? Guarantee Date Description of underlying Small Business / Employer ID Amount Made Date Guaranteed Party Ifso, by what? obligation of Small Business

TOTAL

SCHEDULE 1	SCHEDULE OF	F LOANS OF	AND INVES	STMENTS					l No. 3245-0063 e mm/dd/yyyy
Name of Licensee:								License N	o 00/00-0000
Portfolio Company Name	Employer ID	% Own	% Vote	Cost at End of P	eriod	Unrealized Ap	p (Dep)	Total R	eported Value
Name of Small Business Concern	00-0000000								
1st Date Invested:	Overline?:			<u>Portfolio</u>		Financial Co	ndition (Ur	naudited)	
Current stage of company:	IRR:					test FY End	<u>1 Yr A</u>	Ago	2 Yrs Ago
Exchange: Stock Symbol:	(equit	y only)		As of Da	te:	12/31/2006	12/31/2	2005	12/31/2004
NAICS:			Revenues EBITDA:		-				
If portfolio company's name changed through merger/a	equisition or oth	erwise,	Net Incor						
company name of original investment:			Cashflow	from Operations:					
Address:				arterly Burn Rate:					
City/State:			Cash Bala	ance:					
Zip Code: LN	MI:		Debt:	ita Walaa (Esia Mad					
Portfolio company comments:				iity Value (Fair Mark erprise Value:	(et):				
				equivalent employe	es:				-
				icome taxes paid:					
JI			State inco	ome taxes paid:					
Portfolio Company Financing Rounds									
Date Security Post-M	Ioney Total Rot	and SBIC	s Liqu	idation Preference					
Closed Issued Val (S		∕n Part ((IfAnv)·		Co-ir	vestors in	Round:	
		-							
		_							
Loans and Investments (ordered by date ascending)	=								
Investment Investment Initial In	west. Cost at	Beg.	Additions/	Description of	f C	ost at End	Unrealiz	æd R	eported
Date Type Amou	int of Per	riod (Deductions)	Addition/Deduct	ion	of Period	App (De	p)	Value
-									
Other Notes: Qualifies as start-up per						lass I Appreciat	ion Amount:		
Smaller Concern? E	quity Capital?					lass II Apprecia			
Comments:		-			I:	f Class II, Date o	of Up Round?		
Equity Information Number o	f Shares:		<u>oan/Debt Info</u> Maturity Date:				Tuston	Delinouen est Rate:	
Type of Shares: Market/Liq	nidity:		Repay. Terms		_		Imel	est rait.	——
Equity Features:			Collateral:						

SCHEDULE 1 A/B/C

1 A. SUMMARY OF LOANS AND INVESTMENTS

OMB Approval No. 3245-0063

	OF EQUITY CAPIT. LLER ENTERPRISE F			Expiration Date	nm/dd/yyyy
Name of Licensee				License	e 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 (line1, page 2P) TOTAL DEBT SECURITIES (line 2, page 2P) TOTAL EQUITY SECURITIES (line 3, page 2P) TOTAL PORTFOLIO SECURITIES (line 4, page 2P) 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) TOTAL LOANS AND INVESTMENTS (line 10, page 2P)					
1 B. SUMMARY OF EQUITY CAPITAL INVESTMENTS					
1 C. SMALLER ENTERPRISE FINANCINGS 1 Cumulative dollar amount of Smaller Enterprise Financings extende 2 Cumulative dollar amount of all Financings extended between April 3 Percentage of total Financings extended to Smaller Enterprises (line)	1 25, 1994 and close o	•	ing fiscal year.]]
SEE 13 CFR 107.710 FOR PERCENTAGE OF TOTAL FINANCING	S WHICH MUST BE	IN SMALLER ENTER	PRISES.		

SCHEDULE 2			LOSSES		IZED GAINS ND INVESTM ENDED				MBApproval No. 3245-0063 xpiration Date nm/dd/yyyy
Name of Licensee									License No.
1	2.	3	4	5	б	7	8	9	10
Name of Small Business / Employer ID	Security Type (1)	Transaction Type (2) / Date	Net Sales Price	Cost	Realized Gains/	Compo Cash	onents of Net Sal Note / Maturity Date	Equity /	Name and Address of Purchaser (applies to sales and exchanges)
	-)F- (-)	Date			(Loss)	Cash	Maturity Date	Туре	
							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

SCHEDULE 3	SCHEDULE OF NON-CASH (AS OF	OMB Approval No. 3245-0 Expiration Date nm/dd/yyy						
Name of Licensee License N								
1	2	3	4	5	6	7		
Name of Small Business / Employer ID	Description of Non-cash Gains/Income (1)	Balance at Beginning ofPeriod	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 similiar 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

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

ame ofLicensee									License No	
1	2	3	4	5	6	7	8	9	10	11
	Outstanding	Delinquent P	rincipal:	Delinquent	Interest:	Date of La	st Payment	Amount of L	ast Payment	Fair Mark
Name of Small Business / Employer ID	Principal Balance	Amount Past Due	Days Past Due (1)	Amount Past Due	Days Past Due (1)	Principal	Interest	Principal	Interest	Value o Collater

⁽¹⁾ Based on oldest delinquency.

SCHEDULE 4

SCHEDULE 5	CHEDULE 5 SCHEDULE OF CASH AND INVESTED IDLE FUNDS AS OF						
Name of Licensee	License No						
	EDULE ONLY IF LICE	ENSEE HAS, OR PLANS TO APPLY FO	OR, SBA LEVERAGE				
		, , , , , , , , , , , , , , , , , , , ,					
I. U.S. GOVERNMENT OBLIGATIONS (direct or guaranteed)							
Descriptio	Description Maturity Date Amount						
II. REPURCHASE AGREEM	ENTS WITH FEDERAL	LLY-INSURED INSTITUTION					
Name and Location of Fina	ncial Institution	Maturity Date	Amount				
III. CERTIFICATES OF DEPOSIT ISSUED BY FEDERALLY - INSURED INSTITUTIONS							
Name and Location of Fina	ancial Institution	Maturity Date	Amount				
IV. DEMAND DEPOSIT, MONEY MARKET, AND SAVINGS ACCOUNTS IN FEDERALLY - INSURED INSTITUTIONS							
Name and Location of Fina	ancial Institution	Description	Amount				
V. OTHER CASH AND INVE	STED IDLE FUNDS						
Descriptio	n	Maturity Date (ifapplicable)	Amount				
	TOTAL CASH CA	CH EOUINAI ENTS AND IN F TIN	De l				
TOTAL CASH, CASH EQUIVALENTS AND IDLE FUNDS							

(total must agree with sum of lines 14 and 15, page 2P)

4. Total Assets at Cost: a. Total Assets (line 30, page 2P) b. ADD: Unrealized Depreciation (line 10, col. 2, page 2P) c. LESS: Unrealized Appreciation (line 10, col. 3, page 2P) d. Total Assets at Cost 5. Line 3 Divided by Line 4d (expressed as a percentage) IF LINE 5 IS LESS THAN OR EQUAL TO 20 PERCENT, LICENSEE IS NOT INACTIVEDO 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 b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	SCHEDULE 6	SCHEDULE OF ACT AS OF	IVITY OMB Approval No. 3245-00 Expiration Date mm/dd/yyyy
PART I. FIRST ACTIVITY TEST 1. Cash and Cash Equivalents (line 14, page 2P) 2. Invested Idle Funds (line 15, line 2P) 3. Total Cash and Idle Funds 4. Total Assets at Cost: a. Total Assets (line 30, page 2P) b. ADD: Unrealized Depreciation (line 10, col. 2, page 2P) c. LESS: Unrealized Appreciation (line 10, col. 3, page 2P) d. Total Assets at Cost 5. Line 3 Divided by Line 4d (expressed as a percentage) F LINE 5 IS LESS THAN OR EQUAL TO 20 PERCENT, LICENSEE IS NOT INACTIVE—DO NOT COMPLETE PART II FF LINE 5 IS GREATER THAN 20%, COMPLETE THE SECOND ACTIVITY TEST IN PART II PART II. SECOND ACTIVITY TEST 5. Financings during the Past 18 Months: a. Loans b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital		(Amount rounded to neare	est dollar)
1. Cash and Cash Equivalents (line 14, page 2P) 2. Invested Idle Funds (line 15, line 2P) 3. Total Cash and Idle Funds 4. Total Assets at Cost: a. Total Assets (line 30, page 2P) b. ADD: Unrealized Depreciation (line 10, col. 2, page 2P) c. LESS: Unrealized Appreciation (line 10, col. 3, page 2P) d. Total Assets at Cost 5. Line 3 Divided by Line 4d (expressed as a percentage) 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 b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	Name of Licensee:		License No.:
1. Cash and Cash Equivalents (line 14, page 2P) 2. Invested Idle Funds (line 15, line 2P) 3. Total Cash and Idle Funds 4. Total Assets at Cost: a. Total Assets (line 30, page 2P) b. ADD: Unrealized Depreciation (line 10, col. 2, page 2P) c. LESS: Unrealized Appreciation (line 10, col. 3, page 2P) d. Total Assets at Cost 5. Line 3 Divided by Line 4d (expressed as a percentage) 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 b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital			
2. Invested Idle Funds (line 15, line 2P) 3. Total Cash and Idle Funds 4. Total Assets at Cost: a. Total Assets (line 30, page 2P) b. ADD: Unrealized Depreciation (line 10, col. 2, page 2P) c. LESS: Unrealized Appreciation (line 10, col. 3, page 2P) d. Total Assets at Cost 5. Line 3 Divided by Line 4d (expressed as a percentage) 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 5. Financings during the Past 18 Months: a. Loans b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	PART I. FIRST ACTIV	ITY TEST	
3. Total Cash and Idle Funds 4. Total Assets at Cost: a. Total Assets (line 30, page 2P) b. ADD: Unrealized Depreciation (line 10, col. 2, page 2P) c. LESS: Unrealized Appreciation (line 10, col. 3, page 2P) d. Total Assets at Cost 5. Line 3 Divided by Line 4d (expressed as a percentage) IF LINE 5 IS LESS THAN OR EQUAL TO 20 PERCENT, LICENSEE IS NOT INACTIVEDO 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 b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	1. Cash and Cash Equivalents (line	14, page 2P)	
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d. Total Assets at Cost 5. Line 3 Divided by Line 4d (expressed as a percentage) IF LINE 5 IS LESS THAN OR EQUAL TO 20 PERCENT, LICENSEE IS NOT INACTIVEDO 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 b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	b. ADD: Unrealized Depreciation (line 10, col. 2, page 2P)		
5. Line 3 Divided by Line 4d (expressed as a percentage) IF LINE 5 IS LESS THAN OR EQUAL TO 20 PERCENT, LICENSEE IS NOT INACTIVEDO 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 b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	c. LESS: Unrealized Appreciation (line 10, col. 3, page 2P)		
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PART II. SECOND ACTIVITY TEST 6. Financings during the Past 18 Months: a. Loans b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	5. Line 3 Divided by Line 4d (expressed as a percentage)		
PART II. SECOND ACTIVITY TEST 6. Financings during the Past 18 Months: a. Loans b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	IF LINE 5 IS LESS THAN OR EQ	UAL TO 20 PERCENT, LICENSEE IS	NOT INACTIVEDO NOT COMPLETE PART II
6. Financings during the Past 18 Months: a. Loans b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	IF LINE 5 IS GREATER THAN 20	%, COMPLETE THE SECOND ACTIV	VITY TEST IN PART II
6. Financings during the Past 18 Months: a. Loans b. Debt c. Equity			
a. Loans b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	PART II. SECOND ACT	IVITY TEST	
b. Debt c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	Financings during the Past 18 M	lonths:	
c. Equity d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	a. Loans		
d. Guarantees 7. Total (lines 6a through 6d) 8. Regulatory Capital	b. Debt		
7. Total (lines 6a through 6d) 8. Regulatory Capital	c. Equity		
8. Regulatory Capital	d. Guarantees		
	7. Total (lines 6a through 6d)		
9 Line 7 divided by Line 8 (expressed as a percentage)	8. Regulatory Capital		
2. Line / divided by Line b (expressed as a percentage)	9. Line 7 divided by Line 8 (expres	sed as a percentage)	

IF LINE 9 IS LESS THAN 20%, LICENSEE MAY BE INACTIVE UNDER SECTION 107.590-ATTACH EXPLANATION OF INACTIVITY AND PLANNED CORRECTIVE ACTION. SCHEDULE 7

GENERAL PARTNERS, LIMITED PARTNERS, AND ADVISORY MANAGEMENT AS OF

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

ame of Licensee				License No	
ane of Elcensee	,	3	4		5
•	General Partner/ Limited Partner/ Manager give	Are partnership interests legally owned, beneficially	Number of Partnership Units	Percent C Contr Beginning)wned or rolled End o
Name and Address	exact title(s)	owned, or	Owned	ofPeriod	Perio
	1				

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

- 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
 - 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
- For the current fiscal year, the Licensee should discuss the following:
 - a. Levels of new and follow-on investment anticipated
 - 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 nm/dd/yyyy

Name of I	icensee	License No		
I, [, a General Partner of, a General Partner of(Licenseee),]	(Licensee),] , the General Partner of		
the G	, a Managing Member of	(Licenseee),]		
[, the President of	(Licenseee), j		
the G	eneral Partner of	(Licensee),] do hereby certify as follows		
	dited Annual Financial Report for the fiscal year ende (Licensee) to the Small Bus correct in all respects. The statements and schedules listed below	iness Administration on SBA Form468		
	eneral Partner of nual Financial Report of such company for the fiscal year ended	(Licensee) has reviewed and approved the		
3. (Licensee) has filed all federal, state and local tax returns throu the date hereof, including but not limited to payroll tax returns and informational returns for income tax purposes.				
4	(Licensee) is in good stand	ing under the laws of the State of		
STA	TEMENTS A ND 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: B	y:		
		Name:		
		Title:		