You may not send a completed printout of this form to the SEC to satisfy a filing obligation. You can only satisfy an SEC filing obligation by submitting the information required by this form to the SEC in electronic format online at https://www.onlineforms.edgarfiling.sec.gov.

List of Exempt in Charged Securities (See instructions beginning on page 5) Intentional mistatements or omissions of fact constitute federal criminal violations. See 18 U.S.C. 1001. Name of Issuer's Identity Previous Name(s) None Corporation Jurisdiction of Incorporation/Organization Previous Name(s) None Corporation Jurisdiction of Incorporation/Organization Previous Name(s) None Corporation Year of Incorporation/Organization Street Address 1 Street Address 2 (If more than one issuer is filling this notice, check this box and Identify additional Issuer(s) by attaching Items 1 and 2 Continuation Street Address 1 Street Address 2 (If y State/Province/Country ZIP/Postal Code (If y State/Province/Country Construction	۸D U.S	SSION OMB APPRC OMB Number: 32
Intentional misstatements or omisions of fact constitute federal criminal violations. See 18 U.S.C. 1001. Estimated is hour period Name of Issuer Image: Section Degrammy on page 57. Entity Type (section Degrammy on page 57. Name of Issuer Image: Section Degrammy on page 57. Entity Type (section Degrammy on page 57. Jurisdiction of Incorporation/Organization Image: Section Degrammy on page 57. Entity Type (section Degrammy on page 57. Year of Incorporation/Organization Image: Section Degrammy on page 57. Image: Section Degrammy on page 57. Year of Incorporation/Organization Image: Section Degrammy on page 57. Image: Section Degrammy on page 57. Year of Incorporation/Organization Section Degrammy on page 57. Image: Section Degrammy on page 57. Year of Incorporation/Organization Section Degrammy on page 57. Image: Section Degrammy on page 57. (ff more than one losuer is filling this notice, check this box I and aldentity additional issuer(s) by attaching items 1 and 2 Continuation Street Address 2 Street Address 1 Street Address 2 Image: Section Degrammy on page 57. Street Address 1 Street Address 2 Image: Section Degrammy on page 57. (If y State/Province/Country ZiP/Postal Code Phone No. (If y State/Province/Country <t< th=""><th></th><th></th></t<>		
arm 1. Issuer's Identity hours per f Name of Issuer Entity Type (Select one Corporation/Organization Very text so Representation Corporation/Organization First Name Middle Name City Street Address 2 Corporation/Organization City Street Address 2 Corporation/Organization/Organization Corporatio		
Previous Name(s) None Coporation Jurisdiction of Incorporation/Organization Imited Harmeshi Year of Incorporation/Organization Imited Harmeshi Year of Incorporation/Organization Imited Harmeshi Ower Five Years Ago Within Last Five Years Imited Harmeshi Ower Five Years Ago Within Last Five Years Imited Harmeshi If more than one issuer is filing this notice, check this box and identify additional issuer(s) by attaching Items 1 and 2 Continuation Street Address 1 Street Address 2 City State/Province/Country ZIP/Postal Code Phone No. East Name Middle Name Street Address 1 Street Address 2 Imited Harmeshi Street Address 1 Street Address 2 Imited Harmeshi City State/Province/Country ZIP/Postal Code Item 3. Related Persons Imited Harmeshi Imited Harmeshi Street Address 1 Street Address 2 Imited Harmeshi City State/Province/Country ZIP/Postal Code Imited Harmeshi City State/Province/Country ZIP/Postal Code Imited Harmeshi City State/Province/Country </th <th></th> <th>ee 18 U.S.C. 1001. Estimated average hours per respons</th>		ee 18 U.S.C. 1001. Estimated average hours per respons
Jurisdiction of Incorporation/Organization Corporation Year of Incorporation/Organization Limited Partnershi Year of Incorporation/Organization Business Trust Year of Incorporation/Organization Business Trust Year of Incorporation/Organization Corporation Year of Incorporation/Organization Business Trust Year of Incorporation/Organization Difference Year of Incorporation/Organization Corporation Street Address 1 Street Address 2 Year of Incorporation of Response (if necessary) Yin Postal Code Ital Mare Director Promoter Clarification of Response (if necessary) Yin Postal Code	e of Issuer	Entity Type (Select one)
Janacutation of Incorporation/Organization		Corporation
Year of Incorporation/Organization Immed Liability C Year of Incorporation/Organization General Partnersh Select one: Other Specify Ower Five Years Ago Within Last Five Years Other Specify If more than one issuer is filling this notice, check this box and identify additional issuer(s) by attaching Items 1 and 2 Continuation Street Address 1 Street Address 2 City State/Province/Country ZIP/Postal Code Phone No.		Limited Partnership
Year of Incorporation/Organization		Limited Liability Company
Tear of introl/polat/div/organization City Street Address 1 City Street Address 1 Street Address 2 Street Address 1 Street Address 2 Street Address 2 Street Address 3 Street Address 3 Street Address 4 Street Address 5 Street Address 6 Street Address 7 Street Address 7 Street Address 8 Street Address 8 Street Address 9 Str		General Partnership
(specify year)		
tem 2. Principal Place of Business and Contact Information Street Address 1 Gity State/Province/Country City State/Province/Country Last Name First Name Middle Name Street Address 2 City Street Address 2 Street Address 1 Street Address 2 City State/Province/Country ZIP/Postal Code Code City State/Province/Country ZIP/Postal Code Code City State/Province/Country Item 4. Industry Group Director Promoter Clarification of Response (if necessary) Construction REITS & Finance Magriculture Business Services Construction Commercial Banking Energy Construction Insurance Dil & Gas Restaurants Pooled Investment Fund Biotechnology Computers Is below and answer the question below: Biotechnology Computers Pharace Equity Fund Health Insurance Computers Pharace Equity Fund Health Insurance Atlines & Airporst Other Inv		
Street Address 1 Street Address 2 City State/Province/Country ZIP/Postal Code Phone No. Last Name First Name Middle Name Street Address 2	_	ning Items 1 and 2 Continuation Page
City State/Province/Country ZIP/Postal Code Phone No. City State/Province/Country ZIP/Postal Code Phone No. Last Name First Name Middle Name Street Address 1 Street Address 2 Street Address 2 City State/Province/Country ZIP/Postal Code City State/Province/Country Code Apriculture Banking and Financial Services Construction Pooled Investment Fund </td <td>-</td> <td></td>	-	
tem 3. Related Persons Last Name First Name Middle Name Street Address 1 Street Address 2 Street Address 1 Street Address 2 City State/Province/Country ZIP/Postal Code		
izem 3. Related Persons Last Name First Name Middle Name Street Address 1 Street Address 1 Street Address 2 City State/Province/Country ZIP/Postal Code Relationship(s): Executive Officer Director Promoter Clarification of Response (if necessary) Identify additional related persons by checking this box and attaching Item 3 Continuation tem 4. Industry Group (Select one) Business Services Construction Agriculture Business Services Construction Insurance Insurance Coal Mining Retailing Insurance Energy Commercial Banking Other Real Estate Insurance Insurance Other Real Estate Computers Hedge Fund Other Energy Computers Venture Capital Fund Other Investment Fund Felecting Pharmaceuticals Other Technology Venture Capital Fund Pharmaceuticals Airlines & Airports Computers Pharmaceuticals Other Health Care Other Technology Other Technology Other Technology		Phone No
Last Name First Name Middle Name Street Address 1 Street Address 2 Gity State/Province/Country ZIP/Postal Code Gity State/Province/Country Country ZIP/Postal Code Gity State/Province/Country Country ZIP/Postal Code Gity State/Province/Country Country Conservation Gity State/Province/Country Country Coun		
Last Name First Name Middle Name Street Address 1 Street Address 2 City State/Province/Country ZIP/Postal Code City State/Province/Country ZIP/Postal Code Relationship(s): Executive Officer Director Promoter Clarification of Response (if necessary) Identify additional related persons by checking this box and attaching Item 3 Continuation ceme 4. Industry Group (Select one) Business Services Construction Agriculture Business Services Construction Banking and Financial Services Coll Mining Retilling Investing Electric Utilities Residential Investing Coll Mining Retailing Pooled Investment Fund Other Energy Computers Hedge Fund Biotechnology Computers Venture Capital Fund Hospitals & Physicians Travel Venture Capital Fund Pharmaceuticals Airlines & Airports Other Investment fund Pharmaceuticals Jurism & Travel Services Computer the Investment Company Other Health Care Travel Other Health Care		
Street Address 1 Street Address 2 Street Address 1 Street Address 2 City State/Province/Country ZIP/Postal Code Relationship(s): Executive Officer Director Promoter Clarification of Response (if necessary) Identify additional related persons by checking this box and attaching Item 3 Continuation rem 4. Industry Group (Select one) Business Services Construction Agriculture Business Services Construction Investing Electric Utilities Residential Investing Cold Mining Retailing Investment Banking Environmental Services Restaurants Pooled Investment Fund Dil & Gas Restaurants If selecting this industry group, also select one fund type below and answer the question below: Biotechnology Computers Health Care Biotechnology Computers Telecommunications Venture Capital Fund Pharmaceuticals Airports Venture Capital Fund Pharmaceuticals Lodging & Convention Other Investment Company Other Health Care Travel Other Investment Company Other Health Care		
City State/Province/Country ZIP/Postal Code City State/Province/Country ZIP/Postal Code Relationship(s): Executive Officer Director Promoter Clarification of Response (if necessary) (dentify additional related persons by checking this box and attaching Item 3 Continuation cern 4. Industry Group (Select one) Services Construction Agriculture Business Services Construction Banking and Financial Services Energy Construction Investing Electric Utilities Residential Investing Coal Mining Restaurants Pooled Investment Fund Dil & Gas Restaurants If selecting this industry group, also select one fund type below and answer the question below: Hedge Fund Other Reergy Computers Private Equity Fund Health Care Other Technology Telecommunications Venture Capital Fund Pharmaceuticals Airlines & Airports Other Investment Fund Pharmaceuticals Lodging & Convention Is the issue registered as an investment company Other Health Care Dodging & Convention	lame	Middle Name
City State/Province/Country ZIP/Postal Code City State/Province/Country ZIP/Postal Code Relationship(s): Executive Officer Director Promoter Clarification of Response (if necessary) (Identify additional related persons by checking this box and attaching Item 3 Continuation ctem 4. Industry Group (Select one) Security Construction Agriculture Business Services Construction Banking and Financial Services Energy Construction Investing Electric Utilities Restaurants Investing Coal Mining Retailing Investment Banking Coal Mining Retailing Investment Fund Dil & Gas Retailing If selecting this industry group, also select one fund type below and answer the question below: Biotechnology Computers Hedge Fund Dil & Gas Telecommunications Other Technology Private Equity Fund Hospitals & Physicians Airlines & Airports Venture Capital Fund Pharmaceuticals Lodging & Convention Other Investment Fund Pharmaceuticals Lodging & Convention Is the issue		
Relationship(s): Executive Officer Director Promoter Clarification of Response (if necessary) (Identify additional related persons by checking this box and attaching Item 3 Continuation Clarification of Response (if necessary) (Identify additional related persons by checking this box and attaching Item 3 Continuation Clarification of Response (if necessary) (Identify additional related persons by checking this box and attaching Item 3 Continuation Cerem 4. Industry Group (Select one) Business Services Construction Agriculture Business Services Construction Banking and Financial Services Retirs & Finance Residential Insurance Coal Mining Other Real Estate Restaurants Investment Banking Environmental Services Retailing Restaurants Investment Fund Oil & Gas Restaurants Technology If selecting this industry group, also select one fund type below and answer the question below: Health Care Computers Hedge Fund Biotechnology Other Investment Fund Other Investment Fund Airlines & Airports Other Investment Fund Pharmaceuticals Other Health Care Indign & Convention	Address I	
Relationship(s): Executive Officer Director Promoter Clarification of Response (if necessary) (Identify additional related persons by checking this box and attaching Item 3 Continuation Clarification of Response (if necessary) (Identify additional related persons by checking this box and attaching Item 3 Continuation Clarification of Response (if necessary) (Identify additional related persons by checking this box and attaching Item 3 Continuation term 4. Industry Group (Select one) Business Services Construction Banking and Financial Services Energy REITS & Finance Commercial Banking Electric Utilities Residential Insurance Coal Mining Other Real Estate Investing Fnvironmental Services Retailing Investment Fund Oil & Gas Restaurants Hedge Fund Biotechnology Computers Private Equity Fund Health Care Other Technology Venture Capital Fund Pharmaceuticals Lodging & Convention St he issuer registered as an investment company under the Investment Company Other Health Care Tavel		
Clarification of Response (if necessary) (Identify additional related persons by checking this box and attaching Item 3 Continuation tem 4. Industry Group (Select one) Agriculture Business Services Commercial Banking Electric Utilities Insurance Electric Utilities Investing Electric Utilities Investing Energy Conservation Oald Mining Other Real Estate Pooled Investment Fund Oil & Gas If selecting this industry group, also select one fund type below and answer the question below: Hedge Fund Private Equity Fund Health Care Other Investment Fund Biotechnology Venture Capital Fund Pharmaceuticals Other Health Care Alfines & Airports Other Health Care Alfines & Airports		
Clarification of Response (if necessary) (Identify additional related persons by checking this box and attaching Item 3 Continuation tem 4. Industry Group (Select one) Agriculture Business Services Commercial Banking Electric Utilities Insurance Electric Utilities Investing Electric Utilities Investing Energy Conservation Oald Mining Other Real Estate Pooled Investment Fund Oil & Gas If selecting this industry group, also select one fund type below and answer the question below: Hedge Fund Private Equity Fund Health Care Other Investment Fund Biotechnology Venture Capital Fund Pharmaceuticals Other Health Care Alfines & Airports Other Health Care Alfines & Airports		
Clarification of Response (if necessary) (Identify additional related persons by checking this box and attaching Item 3 Continuation tem 4. Industry Group (Select one) Agriculture Business Services Commercial Banking Electric Utilities Insurance Electric Utilities Investing Electric Utilities Investing Energy Conservation Coal Mining Other Real Estate Pooled Investment Fund Other Energy If selecting this industry group, also select one fund type below and answer the question below: Hedge Fund Private Equity Fund Biotechnology Venture Capital Fund Hospitals & Physicians Other Investment Fund Pharmaceuticals Is the issuer registered as an investment company under the Investment Company Other Health Care	onship(s): Executive Office	
Industry Group (Select one) Agriculture Business Services Commercial Banking Energy Insurance Electric Utilities Investing Energy Conservation Investing Coal Mining Investment Banking Environmental Services Pooled Investment Fund Oil & Gas If selectring this industry group, also select one fund type below and answer the question below: Hedge Fund Private Equity Fund Biotechnology Venture Capital Fund Hospitals & Physicians Other Investment Fund Pharmaceuticals Is the issuer registered as an investment company under the Investment Company Pharmaceuticals		
tem 4. Industry Group (Select one) Agriculture Business Services Banking and Financial Services Construction Commercial Banking Electric Utilities Insurance Energy Conservation Investing Environmental Services Investing Environmental Services Pooled Investment Fund Oil & Gas If selecting this industry group, also select one fund type below and answer the question below: Other Energy Hedge Fund Biotechnology Private Equity Fund Hospitals & Physicians Other Investment Fund Hospitals & Physicians Is the issuer registered as an investment company unde the Investment Company Other Health Care		d attaching Ham 2 Cantinuation Dag
Agriculture Business Services Construction Banking and Financial Services Energy REITS & Finance Commercial Banking Electric Utilities Residential Investing Energy Conservation Other Real Estate Investment Banking Environmental Services Restaurants Pooled Investment Fund Other Energy Computers If selecting this industry group, also select one fund type below and answer the question below: Other Energy Computers Hedge Fund Biotechnology Computers Telecommunications Venture Capital Fund Health Insurance Other Technology Airlines & Airports Other Investment Fund Pharmaceuticals Other Health Care Airlines & Airports Is the issuer registered as an investment company under the Investment Company Other Health Care Airlines & Airports		attaching item 3 Continuation Page
Commercial Banking Electric Utilities Residential Insurance Energy Conservation Other Real Estate Investing Coal Mining Retailing Investment Banking Environmental Services Retailing Pooled Investment Fund Oil & Gas Restaurants If selecting this industry group, also select one fund type below and answer the question below: Other Energy Computers Hedge Fund Biotechnology Computers Telecommunications Venture Capital Fund Hospitals & Physicians Other Technology Other Investment Fund Pharmaceuticals Airlines & Airports Is the issuer registered as an investment company under the Investment Company Other Health Care Lodging & Convention	Agriculture	 Construction
Insurance Energy Conservation Other Real Estate Investing Coal Mining Retailing Investment Banking Environmental Services Retailing Pooled Investment Fund Oil & Gas Restaurants If selecting this industry group, also select one fund type below and answer the question below: Other Energy Computers Hedge Fund Biotechnology Computers Private Equity Fund Health Care Other Technology Venture Capital Fund Pharmaceuticals Other Health Care Other Investment Fund Pharmaceuticals Lodging & Convention Is the issuer registered as an investment company under the Investment Company Other Health Care Lodging & Convention		O REITS & Finance
Investing Other Real Estate Investing Coal Mining Investment Banking Environmental Services Pooled Investment Fund Oil & Gas If selecting this industry group, also select one fund type below and answer the question below: Other Energy Hedge Fund Biotechnology Private Equity Fund Health Care Venture Capital Fund Hospitals & Physicians Other Investment Fund Pharmaceuticals Is the issuer registered as an investment company under the Investment Company Other Health Care		Residential
Investment Banking Environmental Services Retailing Pooled Investment Fund Oil & Gas Restaurants If selecting this industry group, also select one fund type below and answer the question below: Other Energy Computers Hedge Fund Biotechnology Telecommunications Private Equity Fund Health Insurance Other Technology Venture Capital Fund Hospitals & Physicians Travel Other Investment Fund Pharmaceuticals Airlines & Airports Is the issuer registered as an investment company under the Investment Company Other Health Care Lodging & Convention		Other Real Estate
Pooled Investment Fund Oil & Gas Restaurants If selecting this industry group, also select one fund type below and answer the question below: Other Energy Computers Hedge Fund Biotechnology Telecommunications Private Equity Fund Health Insurance Travel Venture Capital Fund Pharmaceuticals Other Health Care Airlines & Airports Is the issuer registered as an investment company under the Investment Company Other Health Care Lodging & Convention		Retailing
If selecting this industry group, also select one fund type below and answer the question below: Other Energy Computers Hedge Fund Biotechnology Telecommunications Private Equity Fund Health Care Other Technology Venture Capital Fund Hospitals & Physicians Travel Other Investment Fund Pharmaceuticals Lodging & Convention Is the issuer registered as an investment company under the Investment Company Other Health Care Tourism & Travel Servet	<u> </u>	\bigcirc
type below and answer the question below: Hedge Fund Private Equity Fund Venture Capital Fund Other Investment Fund Is the issuer registered as an investment company under the Investment Company	<u> </u>	
 Hedge Fund Private Equity Fund Venture Capital Fund Other Investment Fund Is the issuer registered as an investment company under the Investment Company 		\bigcirc
Image: Current and Company under the Investment Company Image: Current and Company under the Investment Company Image: Current and Curren	O Hedge Fund	\bigcirc
Other Investment Fund Other Investment Fund Other Investment Fund Other Investment Company Airlines & Airports Is the issuer registered as an investment company under the Investment Company Other Health Care It of the issuer registered as an investment Company		
Is the issuer registered as an investment company under the Investment Company	õ	
company under the Investment Company	\bigcirc	\bigcirc .
		\bigcirc
Act of 1940? Yes No Manufacturing		\bigcup
Other Banking & Financial Services	0 0	\bigcirc

Washington, DC 20549

Item 5. Issuer Size (Select one)

Revenue Range (for issuer not specifying "hedge' or "other investment" fund in Item 4 above)	specifyii	nte Net Asset Value Range (for issuer ng "hedge" or "other investment" fund in hove)
O No Revenues	OR CR	No Aggregate Net Asset Value
O \$1 - \$1,000,000		\$1 - \$5,000,000
O \$1,000,001 - \$5,000,000	0	\$5,000,001 - \$25,000,000
O \$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
O \$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
O Over \$100,000,000		Over \$100,000,000
O Decline to Disclose		Decline to Disclose
O Not Applicable		Not Applicable
Item 6. Federal Exemptions and Exclusions Cl	Ũ	
•	Investment Company Act Se	•••
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	Section 3(c)(9)
Rule 504(b)(1)(i)	Section 3(c)(2)	Section 3(c)(10)
Rule 504(b)(1)(ii)	Section 3(c)(3)	
Rule 504(b)(1)(iii)	Section 3(c)(4)	Section 3(c)(12)
Rule 505	Section 3(c)(5)	Section 3(c)(13)
Rule 506	Section 3(c)(6)	Section 3(c)(14)
Securities Act Section 4(5)	Section 3(c)(7)	
Item 7. Type of Filing		
O New Notice OR O Amendme	ent	
Date of First Sale in this Offering:	OR First Sale	Yet to Occur
]	
Item 8. Duration of Offering		
Does the issuer intend this offering to last more that	in one year?	Yes 🗌 No
Item 9. Type(s) of Securities Offered (Selec	t all that apply)	
Equity	Pooled Investme	nt Fund Interests
Debt	Tenant-in-Comm	on Securities
Option, Warrant or Other Right to Acquire	Mineral Property	Securities
Another Security	Other (describe)	
Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security		
warrant of other hight to Acquire Security		
Item 10. Business Combination Transaction		
Item 10. Business Combination Transaction Is this offering being made in connection with a bus transaction, such as a merger, acquisition or exchange of		′es 🗌 No
Is this offering being made in connection with a bus		′es 🗌 No
Is this offering being made in connection with a bus transaction, such as a merger, acquisition or exchange of		′es 🗌 No
Is this offering being made in connection with a bus transaction, such as a merger, acquisition or exchange of		′es 🗌 No

FORM D

U.S. Securities and Exchange Commission

Washington, DC 20549

ecipient Recipient CRD Number No CRD Number Associated) Broker or Dealer None (Associated) Broker or Dealer CRD Number No CRD Number treet Address 1 Street Address 2	Item 11. Minimum Investment	
ecipient Recipient CRD Number Associated) Broker or Dealer None Iter Address 1 Street Address 2 Iter Address 2 Integration Iter Address 2 Integration Iter Address 1 State/Province/Country Iter Address 2 Integration Iter Address 3 Integration Iter Address 4 Integration Iter Address 5 Integration Iter Address 4 Integration Iter Address 5 Integration Iter Address 5 Integration Iter Address 5 Integration Iter Address 5 Integration Iter Address 6 Integration	Minimum investment accepted from any outside investor \$	
Associated) Broker or Dealer None (Associated) Broker or Dealer CRD Number Associated) Broker or Dealer CRD Number No CRD Number treet Address 1 ity State/Province/Country ZIP/Postal Code ity State/Province/Country ZIP/Postal Code tates of Solicitation 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 (dentify additional person(s) being paid compensation by checking this box and attaching Item 12 Continuation Page(s).) Item 13. Offering and Sales Amounts (a) Total Offering Amount (b) (c) Total Amount Sold (c) OR Indefinite (b) Total Amount Sold (c) OR Indefinite (b) Total Amount Sold (c) OR Indefinite (c) Total Remaining to be Sold (c) OR Indefinite (b) Total Amount Sold (c) OR Indefinite (c) Total Remaining to be Sold (c) OR Indefinite (b) Total Amount Sold (c) Indefinite (c) Total Remaining to be Sold (c) Indefinite (b) Total Amount Sold (c) Indefinite (c) Total Remaining to be Sold (c) Indefinite (b) Total Amount Sold (c) Indefinite (c) Total Remaining to be Sold (c) Indefinite (b) Total Amount Sold (c) Indefinite (c) Total Remaining to be Sold (c) Indefinite (b) Total Amount Sold (c) Indefinite (c) Total Remaining to be	Item 12. Sales Compensation	
Associated) Broker or Dealer None (Associated) Broker or Dealer CRD Number Associated) Broker or Dealer CRD Number (Associated) Broker or Dealer CRD Number (Associated) Broker or Dealer CRD Number (Interpreted Address 2 (Interpreted Address	Recipient	Recipient CRD Number
Intervention Intervention <td></td> <td>No CRD Number</td>		No CRD Number
treet Address 1	(Associated) Broker or Dealer None	(Associated) Broker or Dealer CRD Number
ity State/Province/Country ZIP/Postal Code itates of Solicitation		No CRD Number
itates of Solicitation 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 Identify additional person(s) being paid compensation by checking this box and attaching Item 12 Continuation Page(s).) Item 13. Offering and Sales Amount (a) Total Offering Amount (c) Total Remaining to be Sold (subtract (a) from (b)) Clarification of Response (if necessary) Item 14. Investors Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the	Street Address 1 S	Street Address 2
itates of Solicitation 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 Identify additional person(s) being paid compensation by checking this box and attaching Item 12 Continuation Page(s).) Item 13. Offering and Sales Amount (a) Total Offering Amount (c) Total Remaining to be Sold (subtract (a) from (b)) Clarification of Response (if necessary) Item 14. Investors Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the		
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 (Identify additional person(s) being paid compensation by checking this box and attaching Item 12 Continuation Page(s).) Item 13. Offering and Sales Amounts (a) Total Offering Amount \$ (b) Total Amount Sold \$ (c) Total Remaining to be Sold \$ (Subtract (a) from (b)) \$ Clarification of Response (if necessary) Item 14. Investors Check this box is the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the	City State/Province/C	Country ZIP/Postal Code
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 (Identify additional person(s) being paid compensation by checking this box and attaching Item 12 Continuation Page(s).) Item 13. Offering and Sales Amounts (a) Total Offering Amount \$ (b) Total Amount Sold \$ (c) Total Remaining to be Sold \$ (Subtract (a) from (b)) \$ Clarification of Response (if necessary) Item 14. Investors Check this box if fsecurities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the		
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 (Identify additional person(s) being paid compensation by checking this box and attaching Item 12 Continuation Page(s).) Item 13. Offering Amount (a) Total Offering Amount (b) Total Amount Sold (c) Total Remaining to be Sold (Subtract (a) from (b)) Clarification of Response (if necessary) Item 14. Investors Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the	States of Solicitation All States	
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 (Identify additional person(s) being paid compensation by checking this box and attaching Item 12 Continuation Page(s).) Item 13. Offering and Sales Amounts (a) Total Offering Amount \$ OR Indefinite (b) Total Amount Sold \$ OR Indefinite (c) Total Remaining to be Sold \$ OR Indefinite (Subtract (a) from (b)) Clarification of Response (if necessary) OR Indefinite Item 14. Investors Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the	AL AK AZ AR CA CO C	T DE DC FL GA HI D
RI SC SD TN TX UT VT VA WA WV WI WY PR (Identify additional person(s) being paid compensation by checking this box and attaching Item 12 Continuation Page(s).) Item 13. Offering and Sales Amounts (a) Total Offering Amount \$ (b) Total Amount Sold \$ (c) Total Remaining to be Sold \$ (Subtract (a) from (b)) Clarification of Response (if necessary) Item 14. Investors Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the		AE MD MA MI MN MS MO
(Identify additional person(s) being paid compensation by checking this box and attaching Item 12 Continuation Page(s).) Item 13. Offering and Sales Amounts (a) Total Offering Amount (b) Total Amount Sold (c) Total Remaining to be Sold (c) Total Remaining to be Sold (c) Total Remaining to be Sold		
Item 13. Offering and Sales Amounts (a) Total Offering Amount (b) Total Amount Sold (c) Total Remaining to be Sold (c) Total Remaining to be Sold (c) Total Remaining to be Sold (c) Total Remaining to be Sold (c) Total Remaining		
(a) Total Offering Amount \$ OR Indefinite (b) Total Amount Sold \$ OR Indefinite (c) Total Remaining to be Sold \$ OR Indefinite (c) Total Remaining to be Sold \$ OR Indefinite Clarification of Response (if necessary) Clarification of Response (if necessary) Item 14. Investors Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the		n by checking this box 🔄 and attaching Item 12 Continuation Page(s).)
(a) Total Offering Amount (b) Total Amount Sold (c) Total Remaining to be Sold (Subtract (a) from (b)) Clarification of Response (if necessary) [[[[[[[[[[[[[[[[[[Item 13. Offering and Sales Amounts	
(c) Total Remaining to be Sold (Subtract (a) from (b)) Clarification of Response (if necessary) Clarification of Response (if necessary) Item 14. Investors Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the	(a) Total Offering Amount	OR Indefinite
(Subtract (a) from (b)) Clarification of Response (if necessary) Item 14. Investors Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the	(b) Total Amount Sold	
Clarification of Response (if necessary) Item 14. Investors Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the		OR Indefinite
Check this box 🗌 if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the		
Check this box 🗌 if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the		
Check this box 🗌 if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the		
Check this box 🗌 if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the		
	Item 14. Investors	
number of such non-accredited investors who already have invested in the offering:		
	number of such non-accredited investors who already have invested	in the offering:
Enter the total number of investors who already have invested in the offering:	Enter the total number of investors who already have invested in the	offering:
tem 15. Sales Commissions and Finders' Fees Expenses	How 45. Color Commissions and Finders' Free Free	

tem 15. Sales Commissions and Finders' Fees Expenses

Provide separately the amounts of sales commissions and finders' fees expenses, if any. If an amount is not known, provide an estimate and check the box next to the amount. ____

-

	Sales Commissions \$	Estimate
Clarification of Response (if necessary)	Finders' Fees \$	Estimate

FORM D

U.S. Securities and Exchange Commission

Washington, DC 20549

Item 16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

Estimate

Clarification of Response (if necessary)

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and submitting this notice.

\$

Terms of Submission. In Submitting this notice, each identified issuer is:

Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in accordance with applicable law, the information furnished to offerees.^{*}

Irrevocably appointing each of the Secretary of the SEC and the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes; or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.

Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on <u>Rule 505 for one of</u> the reasons stated in Rule 505(b)(2)(iii).

This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.

Each identified issuer has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person. (Check this box and attach Signature Continuation Pages for signatures of issuers identified in Item 1 above but not represented by signer below.)

lssuer(s)	Name of Signer
Signature	Title
	Date
Number of continuation pages attached:	

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.

Instructions for Submitting a Form D Notice

General Instructions

Who must file: Each issuer of securities that sells When amendment is not required: An issuer its securities in reliance on an exemption provided in Regulation D or Section 4(5) of the Securities Act of 1933 must file this notice containing the information requested with the U.S. Securities and Exchange Commission (SEC) and with the state(s) requiring it. If more than one issuer has sold its securities in the same transaction, all issuers should be identified in one filing with the SEC, but some states may require a separate filing for each issuer or security sold.

When to file:

o An issuer must file a new notice with the SEC for each new offering of securities no later than 15 calendar days after the "date of first sale" of securities in the offering as explained in the Instruction to Item 7. For this purpose, the date of first sale is the date on which the first investor is irrevocably contractually committed to invest, which, depending on the terms and conditions of the contract, could be the date on which the issuer receives the investor's subscription agreement or check. An issuer may file the notice at any time before that if it has determined to make the offering. An issuer must file a new notice with each state that requires it at the time set by the state. For state filing information, go to www.NASAA.org. А mandatory capital commitment call does not constitute a new offering, but is made under the original offering, so no new Form D filing is required.

o An issuer may file an amendment to a previously filed notice at any time.

o An issuer must file an amendment to a previously filed notice for an offering:

- to correct a material mistake of fact or error in the previously filed notice, as soon as practicable after discovery of the mistake or error;

- to reflect a change in the information provided in the previously filed notice, except as provided below, as soon as practicable after the change; and

- annually, on or before the first anniversary of the most recent previously filed notice, if the offering is continuing at that time.

is not required to file an amendment to a previously filed notice to reflect a change that occurs after the offering terminates or a change that occurs solely in the following information:

- the address or relationship to the issuer of a related person identified in response to Item 3;

- an issuer's revenues or aggregate net asset value;

- the minimum investment amount, if the change is an increase, or if the change, together with all other changes in that amount since the previously filed notice, does not result in a decrease of more than 10%;

- any address or state(s) of solicitation shown in response to Item 12;

- the total offering amount, if the change is a decrease, or if the change, together with all other changes in that amount since the previously filed notice, does not result in an increase of more than 10%:

- the amount of securities sold in the offering or the amount remaining to be sold:

- the number of non-accredited investors who have invested in the offering, as long as the change does not increase the number to more than 35;

- the total number of investors who have invested in the offering; and

- the amount of sales commissions, finders' fees or use of proceeds for payments to executive officers, directors or promoters, if the change is a decrease, or if the change, together with all other changes in that amount since the previously filed notice, does not result in an increase of more than 10%.

Saturdays, Sundays and holidays: If the date on which a notice or an amendment to a previously filed notice is required to be filed falls on a Saturday, Sunday or holiday, the due date is the first business day following.

Amendment content: An issuer that files an amendment to a previously filed notice must provide current information in response to all items of this Form D, regardless of why the amendment is filed.

How to file: Issuers must file this notice with the SEC in electronic format. For state filing information, go to www.NASAA.org.

Filing fee: There is no federal fiing fee. For information on state filing fees, go to www. NASAA.org.

Definitions of terms: Terms used but not defined in this form that are defined in Rule 405 and Rule 501 under the Securities Act of 1933, 17 CFR 230.405 and 230.501, have the meanings given to them in those rules.

Item-by-Item Instructions

Item 1. Issuer's Identity. Identify each legal entity issuing any securities being reported as being offered by entering its full name; any previous name used within the past five years; and its jurisdiction of incorporation or organization, type of legal entity, and year of incorporation or organization within the past five years or status as formed over five years ago or not yet formed. If more than one entity is issuing the securities, identify a primary issuer in the first fields shown on the first page of the form, checking the box provided, and identify additional issuers by attaching Items 1 and 2 continuation page(s).

Item 2. Principal Place of Business and Contact Information. Enter a full street address of the issuer's principal place of business. Post office box numbers and "In care of" addresses are not acceptable. Enter a contact telephone number for the issuer. If you identified more than one issuer in response to Item 1, enter the requested information for the primary issuer you identified in response to that item and, at your option, for any or all of the other issuers you identified on your Item 1 and 2 continuation page(s).

Item 3. Related Persons. Enter the full name and address of each person having the specified relationships with any issuer and identify each relationship:

• Each executive officer and director of the issuer and person performing similar functions (title alone is not determinative) for the issuer, such as the general and managing partners of partnerships and managing members of limited liability companies; and

• Each person who has functioned directly or indirectly as a promoter of the issuer within the past five years of the later of the first sale of securities or the date upon which the Form D filing was required to be made.

If necessary to prevent the information supplied from being misleading, also provide a clarification in the space provided.

Identify additional persons having the specified relationships by checking the box provided and attaching Item 3 continuation page(s).

Item 4. Industry Group. Select the issuer's industry group. If the issuer or issuers can be categorized in more than one industry group, select the industry group that most accurately reflects the use of the bulk of the proceeds of the offering. For purposes of this filing, use the ordinary dictionary and commonly understood meanings of the terms identifying the industry group.

Item 5. Issuer Size.

• **Revenue Range** (for issuers that do not specify "Hedge Fund" or "Other Investment Fund" in response to Item 4): Enter the revenue range of the issuer or of all the issuers together for the most recently completed fiscal year available, or, if not in existence for a fiscal year, revenue range to date. Domestic SEC reporting companies should state revenues in accordance with Regulation S-X under the Securities Exchange Act of 1934. Domestic non-reporting companies should state revenues in accordance with U.S. Generally Accepted Accounting Principles (GAAP). Foreign issuers should calculate revenues in U.S. dollars and state them in accordance with U.S. GAAP, home country GAAP or International Financial Reporting Standards. If the issuer(s) declines to disclose its revenue range, enter "Decline to Disclose." If the issuer's(s') business is intended to produce revenue but did not, enter "No Revenues." If the business is not intended to produce revenue (for example, the business seeks asset appreciation only), enter "Not Applicable."

• Aggregate Net Asset Value (for issuers that specify "Hedge Fund" or "Other Investment Fund" in response to Item 4): Enter the aggregate net asset value range of the issuer or of all the issuers together as of the most recent practicable date. If the issuer(s) declines to disclose its aggregate net asset value range, enter "Decline to Disclose."

Item 6. Federal Exemption(s) and Exclusion(s) Claimed. Select the provision(s) being claimed to exempt the offering and resulting sales from the federal registration requirements under the Securities Act of 1933 and, if applicable, to exclude the issuer from the definition of "investment company" under the Investment Company Act of 1940. Select "Rule 504(b)(1) (not (i), (ii) or (iii))" only if the issuer is relying on the exemption in the introductory sentence of Rule 504 for offers and sales that satisfy all the terms and conditions of Rules 501 and 502(a), (c) and (d).

Item 7. Type of Filing. Indicate whether the issuer is filing a new notice or an amendment to a notice that was filed previously. If this is a new notice, enter the date of the first sale of securities in the offering or indicate that the first sale has "Yet to Occur." For this purpose, the date of first sale is the date on which the first investor is irrevocably contractually committed to invest, which, depending on the terms and conditions of the contract, could be the date on which the issuer receives the investor's subscription agreement or check.

Item 8. Duration of Offering. Indicate whether the issuer intends the offering to last for more than one year.

Item 9. Type(s) of Securities Offered. Select the appropriate type or types of securities offered as to which this notice is filed. If the securities are debt convertible into other securities, however, select "Debt" and any other appropriate types of securities except for "Equity." For purposes of this filing, use the ordinary dictionary and commonly understood meanings of these categories. For instance, equity securities would be securities that represent proportional ownership in an issuer, such as ordinary common and preferred stock of corporations and partnership and limited liability company interests; debt securities would be securities that represent ownership interests in a pooled or collective investment vehicle; tenant-in-common securities would be securities that include an undivided fractional interest in real property other than a mineral property; and mineral property securities would be securities that include an undivided interest in an oil, gas or other mineral property.

Item 10. Business Combination Transaction. Indicate whether or not the offering is being made in connection with a business combination, such as an exchange (tender) offer or a merger, acquisition, or other transaction of the type described in paragraph (a)(1), (2) or (3) of Rule 145 under the Securities Act of 1933. Do not include an exchange (tender) offer for a class of the issuer's own securities. If necessary to prevent the information supplied from being misleading, also provide a clarification in the space provided.

Item 11. Minimum Investment. Enter the minimum dollar amount of investment that will be accepted from any outside investor. If the offering provides a minimum investment amount for outside investors that can be waived, provide the lowest amount below which a waiver will not be granted. If there is no minimum investment amount, enter "0." Investors will be considered outside investors if they are not employees, officers, directors, general partners, trustees (where the issuer is a business trust), consultants, advisors or vendors of the issuer, its parents, its majority owned subsidiaries, or majority owned subsidiaries of the issuer's parent.

Item 12. Sales Compensation. Enter the requested information for each person that has been or will be paid directly or indirectly any commission or other similar compensation in cash or other consideration in connection with sales of securities in the offering, including finders. Enter the CRD number for every person identified and any broker and dealer listed that has a CRD number. CRD numbers can be found at http://brokercheck.finra.org. A person that does not have a CRD number need not obtain one in order to be listed, and must be listed when required regardless of whether the person has a CRD number. In addition, check the State(s) in which the named person has solicited or intends to solicit investors. If more than five persons to be listed are associated persons of the same broker or dealer, enter only the name of the broker or dealer, its CRD number and street address, and the State(s) in which the named person has solicited or intends to solicit investors.

Item 13. Offering and Sales Amounts. Enter the dollar amount of securities being offered under a claim of federal exemption identified in Item 6 above. Also enter the dollar amount of securities sold in the offering as of the filing date. Select the "Indefinite" box if the amount being offered is undetermined or cannot be calculated at the present time, such as if the offering includes securities to be acquired upon the exercise or exchange of other securities or property and the exercise price or exchange value is not currently known or knowable. If an amount is definite but difficult to calculate without unreasonable effort or expense, provide a good faith estimate. The total offering and sold amounts should include all cash and other consideration to be received for the securities, including cash to be paid in the future under mandatory capital commitments. In offerings for consideration other than cash, the amounts entered should be based on the issuer's good faith valuation of the consideration. If necessary to prevent the information supplied from being misleading, also provide a clarification in the space provided.

Item 14. Investors. Indicate whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors as defined in Rule 501(a), 17 CFR 230.501(a), and provide the number of such investors who have already invested in the offering. In addition, regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, specify the total number of investors who already have invested.

Item 15. Sales Commission and Finders' Fees Expenses. The information on sales commissions and finders' fees expenses may be given as subject to future contingencies.

Item 16. Use of Proceeds. No additional instructions.

Signature and Submission. An individual who is a duly authorized representative of each issuer identified must sign, date and submit this notice for the issuer. The capacity in which the individual is signing should be set forth in the "Title" field underneath the individual's name.

The name of the issuer(s) on whose behalf the notice is being submitted should be set forth in the "Issuer" field beside the individual's name; if the individual is signing on behalf of all issuers submitting the notice, the word "All" may be set forth in the "Issuer" field. Attach signature continuation page(s) to have different individuals sign on behalf of different issuer(s). Enter the number of continuation pages attached and included in the filing. If no continuation pages are attached, enter "0".

FORM D

U.S. Securities and Exchange Commission

Washington, DC 20549

Items 1 and 2 Continuation Page

Item 1 and 2. Issuer's Identity and Contact Information (Continued)

Name of Issuer			Entity Type (Select one)
	Previous Name(s)	None	O Corporation
			Limited Partnership
Jurisdiction of Incorporation/Organization			Image: State
			General Partnership
Year of Incorporation/Organization (Select one)			Business Trust O Other (Specify)
Over Five Years Ago Within Last Five Years	Yet t	to Be Formed	
(specify year)			
At your option, supply separate contact information	on for this issuer:		
Street Address 1		Street Address 2	
City	State/Province/Country	ZIP/Postal Code	Phone No.
Name of Issuer	Previous Name(s)	None	Entity Type (Select one)
			Corporation
Jurisdiction of Incorporation/Organization			Limited Partnership
			Limited Liability Company
			General Partnership
Year of Incorporation/Organization			Business Trust
(Select one)		- Do Formerad	Other (Specify)
Over Five Years Ago Within Last Five Years (specify year)		o Be Formed	
At your option, supply separate contact information	n for this issuer:		
Street Address 1		Street Address 2	
City	State/Province/Country	ZIP/Postal Code	Phone No.
	Previous Name(s)	None	Entity Type (Select one)
			Corporation
Jurisdiction of Incorporation/Organization			Limited Partnership
			Limited Liability Company
			General Partnership
Year of Incorporation/Organization			O Business Trust
(Select one)			O Other (Specify)
O Over Five Years Ago O Within Last Five Years (specify year)	O Yet 1	to Be Formed	
At your option, supply separate contact information	for this issuer:		
Street Address 1		Street Address 2	
City S		ZIP/Postal Code	Phone No.

⁽Copy and use additional copies of this page as necessary.) Form D 8



U.S. Securities and Exchange Commission

Washington, DC 20549

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name	First Name		Middle Name
Street Address 1		Street Address 2	
City State/P	rovince/Country	ZIP/Postal Code	
Relationship(s): Executive Officer Direct	tor 🗌 Promoter		
Clarification of Response (if necessary)			
Last Name	First Name		Middle Name
Street Address 1		Street Address 2	
City State/P	rovince/Country	ZIP/Postal Code	
Relationship(s): Executive Officer Direc	tor Promoter		
Clarification of Response (if necessary)			
- – – – – – – – –			
Last Name	First Name		Middle Name
Street Address 1		Street Address 2	
City State/P	rovince/Country	ZIP/Postal Code	
Relationship(s): Executive Officer Direct	tor Promoter		
Clarification of Response (if necessary)			
Last Name	First Name		Middle Name
		Street Address 2	
Street Address 1			
City State/P	Province/Country	ZIP/Postal Code	
Relationship(s): Executive Officer Direc			
Relationship(s): Evecutive()tticer Direc			
Clarification of Response (if necessary)	ctor Promoter		

Washington, DC 20549

Item 12 Continuation Page

Item 12. Sales Compensation (Continued)

Recipient	Recipient CRD Number
	No CRD Number
(Associated) Broker or Dealer 🛛 None	(Associated) Broker or Dealer CRD Number
	No CRD Number
Street Address 1	Street Address 2
City State/Province	e/Country ZIP/Postal Code
States of Solicitation All States	
AL AK AZ AR CA CO	CT DE DC FL GA HI DD
│ IL │ IN │ IA │ KS │ KY │ LA │ │ MT │ NE │ NV │ NH │ NJ │ NM │	ME MD MA MI MN MS MO
Recipient	Recipient CRD Number
Recipient	Recipient CRD Number
	No CRD Number
Recipient (Associated) Broker or Dealer None	(Associated) Broker or Dealer CRD Number
(Associated) Broker or Dealer None	(Associated) Broker or Dealer CRD Number
	(Associated) Broker or Dealer CRD Number
(Associated) Broker or Dealer None Street Address 1	Image: Constraint of the second se
(Associated) Broker or Dealer None	Image: Constraint of the second se
(Associated) Broker or Dealer None Street Address 1	Image: Constraint of the second se
(Associated) Broker or Dealer None Street Address 1	Image: Constraint of the second se
(Associated) Broker or Dealer None Street Address 1	Image: Constraint of the second se
(Associated) Broker or Dealer None (Associated) Broker or Dealer None Street Address 1 City State/Province States of Solicitation All States	Image: Constraint of the second se
(Associated) Broker or Dealer None (Associated) Broker or Dealer None Street Address 1 Street Address 1 City State/Province City State/Province States of Solicitation All States AL AK AZ AR CA CO	CT DE DC FL GA HI ID
(Associated) Broker or Dealer (Associated) Broker or Dealer Street Address 1 City City State/Province States of Solicitation All States AL AK AZ IL IN IA	Associated) Broker or Dealer CRD Number (Associated) Broker or Dealer CRD Number Street Address 2 street Address 2 e/Country ZIP/Postal Code CT DE DC FL GA HI ID ME MD MA MI No CRD Number No CRD Number
(Associated) Broker or Dealer None (Associated) Broker or Dealer None Street Address 1 States Address 1 City State/Province City State/Province States of Solicitation All States AL AK AZ AR CA CO IL IN IA KS KY LA	Associated) Broker or Dealer CRD Number (Associated) Broker or Dealer CRD Number No CRD Number Street Address 2 2/Country ZIP/Postal Code 2/Country ZIP/Postal Code CT DE DC FL GA HI ID ME MD MA MI MN MS MO
(Associated) Broker or Dealer (Associated) Broker or Dealer Street Address 1 City City State/Province States of Solicitation All States AL AK AZ IL IN IA	Associated) Broker or Dealer CRD Number (Associated) Broker or Dealer CRD Number Street Address 2 street Address 2 e/Country ZIP/Postal Code CT DE DC FL GA HI ID ME MD MA MI No CRD Number No CRD Number



U.S. Securities and Exchange Commission Washington, DC 20549

Signature Continuation Page

Signature and Submission

The undersigned is the duly authorized representative of the issuer(s), identied in the field beside the individual's name below.

lssuer	Name of Signer	
Signature	Title	
		Date
Issuer	Name of Signer	
Signature	Title	
		Date
lssuer	Name of Signer	
Signature	Title	
		Date
Issuer	Name of Signer	
Signature	Title	
		Date