

SBA FORM 468
(Corporate SBICs)
SHORT FORM

OMB Approval No. 3245-0063
Expiration Date 10/31/2017

Name of Licensee:

License Number:

Street Address:

City, State, and Zip Code: LL

County:

Employer ID Number:

For the Reporting Period
Ending:

Months: 3

A - Fund Focus:

B - Ownership:

Please Note: The estimated burden for completing this form is 35 hours per response if a wind-up plan is required and 25 hours per response if a wind-up plan is not required. 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 U.S. Small Business Administration, Chief Administrative Information Branch, Washington, D.C. 20416 and/or SBA Desk Officer, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB.

STATEMENT OF FINANCIAL POSITION
AS OF _____
(Amounts rounded to the nearest dollar)

OMB Approval No. 3245-0063
 Expiration Date 10/31/2017

Name of the Licensee: _____

License Number: _____

ASSETS:

	<u>Cost:</u> (Col. 1)	<u>Unrealized Depreciation</u> (Col. 2)	<u>Unrealized Appreciation</u> (Col. 3)	<u>Reported Value (1)</u> (Col. 4)
<u>LOANS AND INVESTMENTS</u>				
Portfolio Securities:				
1 Loans	\$0	\$0	\$0	\$0
2 Debt Securities	\$0	\$0	\$0	\$0
3 Equity Securities	\$0	\$0	\$0	\$0
4 Total Portfolio Securities	\$0	\$0	\$0	\$0
Assets Acquired in Liquidation of Portfolio Securities:				
5 Receivables from Sale of Assets Acquired	\$0	\$0	\$0	\$0
6 Assets Acquired	\$0	\$0	\$0	\$0
7 Total Assets Acquired	\$0	\$0	\$0	\$0
8 Operating Concerns Acquired	\$0	\$0	\$0	\$0
9 Notes and Other Securities Received	\$0	\$0	\$0	\$0
10 TOTAL LOANS AND INVESTMENTS	\$0	\$0	\$0	\$0
11 Less Current Maturities				\$0
12 Loans and Investments Net of Current Maturities				\$0
Investment in 301(d) Licensee (2)				
13 Name/License No.				\$0
<u>CURRENT ASSETS</u>				
14 Cash and Cash Equivalents		\$0		
15 Invested Idle Funds		\$0	\$0	
16 Interest and Dividends Receivable		\$0		
17 Notes and Accounts Receivable		\$0		
18 Receivables from Parent or Other Associates		\$0		
19 Less: Allowance for Losses (lines 16, 17, and 18)		\$0	\$0	
20 Current Maturities of Portfolio Securities		\$0		
21 Current Maturities of Assets Acquired		\$0		
22 Current Maturities of Operating Concerns Acquired		\$0		
23 Current Maturities of Other Securities		\$0	\$0	
24 Other (specify) _____			\$0	
25 Other (specify) _____			\$0	\$0
<u>OTHER ASSET</u>				
26 Net Furniture and Equipment			\$0	
27 Net Leverage Fees			\$0	
28 Other (specify) _____			\$0	
29 Other (specify) _____			\$0	\$0
30 TOTAL ASSETS				\$0

(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 the nearest dollar)

OMB Approval No. 3245-0063
 Expiration Date 10/31/2017

Name of the Licensee: _____

License No: _____

LIABILITIES AND CAPITAL

Liabilities

Long-Term Debt

31 Notes and Debentures payable to or guaranteed by SBA.	\$0		
32 Notes and Debentures Payable to Others	\$0		
33a. 4% Redeemable Preferred Stock (301(d) Licenses Only)	\$0		
b. Cumulative Undeclared 4% Dividends	\$0	\$0	\$0

Current Liabilities

34 Accounts Payable		\$0	
35 Due to Parent or Other Associates			
a. Management Expenses Due to Associates	\$0		
b. Other Due to Associates	\$0	\$0	
36. Accrued Interest Payable		\$0	
37. Accrued Taxes Payable		\$0	
38. Dividends Payable		\$0	
39. Short-term notes Payable/Lines of Credit		\$0	
40 Other (specify) _____		\$0	
41 Other (specify) _____		\$0	\$0

Other Liabilities

42 Deferred Credits		\$0	
43 Deferred Fee Income		\$0	
44 Other (specify) _____		\$0	
45 Total Liabilities			\$0

CAPITAL

46 Capital Stock	\$0		
47 Paid-in Surplus	\$0		
48 Restricted Contributed Capital Surplus		\$0	
49 Capital Stock and Surplus		\$0	
50 3% Preferred Stock Purchased by SBA		\$0	
51 Unrealized Gains (Loss) on Securities Held		\$0	
52 Non-Cash Gains/Income		\$0	
53 Undistributed Net Realized Earnings			
a. Restricted (Equal to Cost of Treasury Stock)	\$0		
b. Unrestricted	\$0		
c. Total (53a plus 53b)		\$0	
54 Undistributed Realized Earnings (line 52 plus line 53c)		\$0	
55 Total			\$0
56: Less: Cost of Treasury Stock			\$0
57 TOTAL CAPITAL			\$0

58 TOTAL LIABILITIES AND CAPITAL (LINES 45 AND 57) \$0

STATEMENT OF OPERATIONS REALIZED
For 3 MONTHS ENDED
(Amounts rounded to the nearest dollar)

OMB Approval No. 3245-0063
 Expiration Date 10/31/2017

Name of the Licensee:

License No:

INVESTMENT INCOME

1 Interest Income		\$0
2 Dividend Income		\$0
3 Income (Loss) from Investments in Partnerships/Flow-through Entities		\$0
4 Income (Loss) from Investments in Section 301(d) Licensee		\$0
5 Fees for Management Services		\$0
6 Application, Closing and Other Fees		\$0
7 Interest on Cash Equivalents and Invested Idle Funds		\$0
8 Income from Assets Acquired in Liquidation of Loans and Investment (net of \$0 Expenses)		\$0
9 Other Income		\$0
10 GROSS INVESTMENT INCOME		\$0

EXPENSES

11 Interest Expense			
a. Interest Expense -- SBA Debentures	\$0		
b. Other Interest Expense	\$0	\$0	
12 Commitment Fees & Other Financial Costs		\$0	
13 Compensation and Benefits (Officer and Employee)		\$0	
14 Investment Advisory and Management Services		\$0	
15 Director's and Stockholder's Meetings		\$0	
16 Appraisal and Investigation		\$0	
17 Advertising, Communication and Travel		\$0	
18 Cost of Space Occupied		\$0	
19 Depreciation and Amortization			
a. Amortization of Leverage Fees	\$0		
b. Other Depreciation and Amortization	\$0	\$0	
20 Insurance		\$0	
21 Payroll and Other Taxes		\$0	
22 Provision for Losses on Receivables (excluding loans receivable)		\$0	
23 Legal Fees		\$0	
24 Audit and Examination Fees		\$0	
25 Miscellaneous Expenses			
a. Misc. #1		\$0	
b. Misc. #2		\$0	
c. Misc. #3		\$0	
d. Misc. #4		\$0	
e. Misc. #5		\$0	
f. Misc. #6		\$0	\$0
26 TOTAL EXPENSES			\$0
27 NET INVESTMENT INCOME (LOSS) BEFORE INCOME TAXES			\$0
28 NET REALIZED GAIN (LOSS) ON INVESTMENTS BEFORE INCOME TAXES (1)			\$0
29 NET INCOME (LOSS) BEFORE INCOME TAXES AND NONRECURRING ITEMS			\$0
30 Income Tax Expense (Benefit)			\$0
31 NET INCOME (LOSS) BEFORE NONRECURRING ITEMS			\$0
32 Extraordinary Item			\$0
33 Cumulative Effect of Change in Accounting Principle			\$0
34 NET INCOME (LOSS)			\$0

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

STATEMENT OF CASH FLOWS
For 3 MONTHS ENDED
(page 1 of 2)
(Amounts rounded to the nearest dollar)

OMB Approval No. 3245-0063
 Expiration Date 10/31/2017

Name of the Licensee:

License No:

OPERATING ACTIVITIES

Cash Inflows

1 Interest Received from Portfolio Concerns	\$0
2 Dividend Received from Portfolio Concerns	\$0
3 Other Income Received from Portfolio Concerns	\$0
4 Management Services and Other Fees Received	\$0
5 Interest on Cash Equivalents and Invested Idle Funds	\$0
6 Cash Received from Assets Acquired in Liquidation	\$0
7 Other Operating Cash Receipts	\$0

Cash Outflows

8 Interest Paid	\$0
9 Commitment Fees and Other Financial Costs	\$0
10 Investment Advisory and Management Fees	\$0
11 Officers, Directors and Employees' Compensation and Benefits	\$0
12 Operating Expenditures (Excluding Compensation and Benefits)	\$0
13 Income Taxes paid	\$0
14 Other Operating Cash Disbursements	\$0

15 NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES

\$0

INVESTING ACTIVITIES

Cash Inflows

16 Loan Principal Payments Received from Portfolio Concerns	\$0
17 Returns of Capital Received from Portfolio Concerns	\$0
18 Net Proceeds from Disposition of Portfolio Securities	\$0
19 Liquidation of Idle Funds Investments	\$0
20 Other (Specify) <input type="text"/>	\$0

Cash Outflows

21 Purchase of Portfolio Securities	\$0
22 Loans to Portfolio concerns	\$0
23 Idle Funds Investment	\$0
24 Other (Specify) <input type="text"/>	\$0

25 NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES

\$0

FINANCING ACTIVITIES

Cash Inflows

26 Proceeds from Issuance of SBA-Guaranteed Debentures	\$0
27 Proceeds from Non-SBA Borrowing	\$0
28 Proceeds from Sale of Stock or Other Capital Contribution	\$0
29 Other (Specify) <input type="text"/>	\$0

Cash Outflows

30 SBA Leverage Fees	\$0
31 Principal Payments on SBA-Guaranteed Debentures	\$0
32 Principal Payments on Non-SBA Borrowing	\$0
33 Redemption of 4% Preferred Stock	\$0
34 Redemption of 3% Preferred Stock	\$0
35 Redemption of Stock (excluding 3% and 4% Preferred)	\$0
36 Dividends Paid	\$0
37 Other (Specify) <input type="text"/>	\$0

38 NET CASH PROVIDED BY (USED IN) FINANCING ACTIVITIES

\$0

STATEMENT OF CASHFLOW
3 MONTHS ENDED
(page 2 of 2)
(Amounts rounded to the nearest dollar)

OMB Approval No. 3245-0063
Expiration Date 10/31/2017

Name of the Licensee:	License No:
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39 INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS		\$0
40 CASH AND CASH EQUIVALENTS AT BEGINNING OF PERIOD		\$0
41 CASH AND CASH EQUIVALENTS AT END OF PERIOD (line 14, page 2C)		\$0

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

42 Net Income (Loss) (Line 34, page 4C)		\$0
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Adjustments to Reconcile Net Income (Loss) to Net Cash Provided by (used in) Operating Activities:

43 Depreciation and Amortization (line 19, page 4C)		\$0
44 Provision for Losses on Accounts Receivable (line 22, page 4C)		\$0
45 Provision for Deferred Income Taxes		\$0
46 Realized (Gains) Losses on Investments (line 28, page 4C)		\$0
47 Other (Specify)		

a.		\$0	
b.		\$0	
c.		\$0	\$0

Changes in Operating Assets and Liabilities Net of Noncash Items

48 (Increase) Decrease in Interest and Dividends Receivable		\$0
49 (Increase) Decrease in Other Current Assets		\$0
50 Increase (Decrease) in Accounts Payable		\$0
51 Increase (Decrease) in Accrued Interest Payable		\$0
52 Increase (Decrease) in Accrued Taxes Payable		\$0
53 Increase (Decrease) in Dividends Payable		\$0
54 Increase (Decrease) in Other Current Liabilities		\$0
55 Other (Specify) 		\$0
56 Other (Specify) 		\$0

57 NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES		\$0
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(Total must agree with line 15, page 5C)

Supplemental disclosure of non-cash financing and investing activities may be required.
See ASC 230, "Statement of Cash Flows".

**STATEMENT OF STOCKHOLDER'S EQUITY
AS OF
(Amounts rounded to the nearest dollar)**

OMB Approval No. 3245-0063
Expiration Date 10/31/2017

Name of the Licensee: _____

License No: _____

PART I. CAPITAL STOCK AND PAID-IN SURPLUS

	Capital Stock (page 3C, line 46)	PAID-IN SURPLUS	Total
1 BALANCE AT BEGINNING OF PERIOD	\$0	\$0	\$0
2 ADDITIONS:			
a. Capital stock issued for cash	\$0	\$0	\$0
b. Capital stock issued for services rendered	\$0	\$0	\$0
c. Capital stock issued for contributed non-cash assets	\$0	\$0	\$0
d. Capitalization of Retained Earnings Available for Distribution	\$0	\$0	\$0
e. Gain on Sale of Treasury Stock	\$0	\$0	\$0
f. Other credits (specify) _____	\$0	\$0	\$0
3 Total additions (sum of 2a through 2f)	\$0	\$0	\$0
4 Subtotal (line 1 plus line 3)	\$0	\$0	\$0
5 DEDUCTIONS:			
a. Retirement of capital stock	\$0	\$0	\$0
b. Return of capital distributions	\$0	\$0	\$0
c. Loss on sale of Treasury Stock	\$0	\$0	\$0
d. Other debits (specify) _____	\$0	\$0	\$0
6 Total deductions (sum of 5a through 5b)	\$0	\$0	\$0
7 BALANCE AT END OF PERIOD (line 4 minus line 6) -- Total must agree with lines 46 and 47, page 3C	\$0	\$0	\$0

PART II. UNDISTRIBUTED REALIZED EARNINGS

	NONCASH GAINS / INCOME (1)	UNDISTRIBUTED NET REALIZED EARNINGS (2)	UNDISTRIBUTED REALIZED EARNINGS (1) + (2)
1 BALANCE AT BEGINNING OF PERIOD	\$0	\$0	\$0
2 ADDITIONS:			
a. Net investment income	\$0	\$0	\$0
b. Realized gain (loss) on investments	\$0	\$0	\$0
c. Gain on appreciation of securities distributed in kind	\$0	\$0	\$0
d. Other (specify) _____	\$0	\$0	\$0
3 Total additions (sum of 2a through 2d)	\$0	\$0	\$0
4 Subtotal (line 1 plus line 3)	\$0	\$0	\$0
5 DEDUCTIONS:			
a. Dividends - Cash		\$0	\$0
b. Dividends - Stock		\$0	\$0
c. Dividends - In-Kind (at fair value)	\$0	\$0	\$0
d. Capitalization of Retained Earnings available for Distribution		\$0	\$0
e. Other (specify) _____	\$0	\$0	\$0
6 Total deductions (sum of 5a through 5e)	\$0	\$0	\$0
7 Total before collection of non-cash gains/income (line 4 minus line 6)	\$0	\$0	\$0
8 Collection of non-cash gains/income	\$0	\$0	
9 BALANCE AT END OF PERIOD (line 7 plus line 8) - Totals must agree with lines 52, 53c and 54, page 3C	\$0	\$0	\$0

**I. RETAINED EARNINGS AVAILABLE FOR DISTRIBUTION
 II. REGULATORY AND LEVERAGEABLE CAPITAL
 AS OF _____
 (Amounts rounded to nearest dollar)**

OMB Approval No. 3245-0063

Expiration Date 10/31/2017

Name of the Licensee:

License No:

PART I. RETAINED EARNINGS AVAILABLE FOR DISTRIBUTION OR CAPITALIZATION.

1 Undistributed net Realized Earnings (line 53, page 3C)	\$0
2 LESS: Unrealized Depreciation (line 10, column 2, page 2C)	\$0
3 ADD: Cumulative Unpaid distributions on 4% Redeemable Preferred Stock--Section 301(d) Licensees only (line 33b, page 3C)	\$0
4 RETAINED EARNINGS AVAILABLE FOR DISTRIBUTION OR CAPITALIZATION	\$0

PART II. SCHEDULE OF REGULATORY AND LEVERAGEABLE CAPITAL

1 Capital Stock and Paid-in Surplus (sum of lines 46 and 47, page 3C)	\$0
2 ADD: Unfunded binding commitments from Institutional Investors	\$0
3 LESS: Regulatory Distributions	
a. Organization Expenses Not Approved by SBA (1)	\$0
b. Capital Stock Issued for Services	\$0
c. Capital Stock Issued for Non-cash Assets (unless approved by SBA for inclusion in Regulatory Capital or converted to cash)	\$0
d. Treasury Stock at Cost	\$0
e. Other (specify) _____	\$0
4 Total Regulatory Deductions (Sum of 3a through 3d)	\$0
5 Other Adjustments to Regulatory Capital (specify) _____	\$0
6 REGULATORY CAPITAL (sum of lines 1, 2, 4, and 5)	\$0
7 LESS: Unfunded binding commitments from Institutional Investors	\$0
8 LESS: Non-cash assets included in Regulatory Capital, other than eligible investments in Small Concerns	\$0
9 LESS: Other deductions (specify) _____	\$0
10 LEVERAGEABLE CAPITAL (sum of lines 6 through 9)	\$0

PART IIa. ADJUSTMENT TO REGULATORY CAPITAL FOR CAPITAL IMPAIRMENT AND OVERLINE PURPOSES

PART IIa ONLY APPLIES IF LICENSEE HAS COMPLETED THE REPURCHASE OF ITS 3% PREFERRED STOCK FROM SBA.

11 REGULATORY CAPITAL (Part II, line 6)	\$0
12 ADD: Restricted Contributed Capital Surplus (line 48, page 3C)	\$0
13 ADJUSTED REGULATORY CAPITAL FOR CAPITAL IMPAIRMENT AND OVERLINE PURPOSES (line 11 plus line 12)	\$0

NOTES

(1) Deduct only those organizational expenses which were not accepted as reasonable by SBA.

SCHEDULE OF GUARANTEES AS OF _____

OMB Approval No. 3245-0063
Expiration Date 10/31/2017

Name of the 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 10/31/2017

Name of the Licensee:

License No.

Portfolio Company Name	Employer ID	% Own	% Vote	Cost at End of Period	Unrealized App (Dep)	Total Reported Value
		0%	0%	\$0	\$0	\$0

Loans and Investments (ordered by date ascending)

Investment Date	Investment Type	Initial Invest. Amount	Cost at Beg. of Period	Additions / Deductions	Description of Addition / Deductions	Cost At End of Period	Unrealized App (Dep)	Total Reported Value
		\$0	\$0	\$0		\$0	\$0	\$0
Other Notes: Qualifies as start-up per CFR 107.50?						Class I and II Appreciation:		
Smaller Enterprise? <input type="checkbox"/> Equity Capital? <input type="checkbox"/>						Class I Appreciation Amount: \$0		
Comments:						Class II Appreciation Amount: \$0		
						If Class II, Date of Up Round?		
Equity Information:			Loan/Debt Information:			Status:		
Number of Shares:			Maturity Date:			Interest Rate:		
Type of Shares:		Market /Liquidity:		Repay. Terms:				
Equity Features: 0				Collateral :				
Warrants?	<u>No</u>	Expiration Date:	Date Investment Concluded:					

**1 A. SUMMARY OF LOANS AND INVESTMENTS 1 B.
SMALLER ENTERPRISE FINANCINGS AS OF**

Name of the 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 2C)	\$0	\$0	\$0	\$0	\$0
Total Debt Securities (line 2, page 2C)	\$0	\$0	\$0	\$0	\$0
Total Equity Securities (line 3, page 2C)	\$0	\$0	\$0	\$0	\$0
Total Portfolio Securities (line 4, page 2C)	\$0	\$0	\$0	\$0	\$0
Total Assets Acquired (line 7, page 2C)	\$0	\$0	\$0	\$0	\$0
Total Operating Concerns Acquired (line 8, page 2C)	\$0	\$0	\$0	\$0	\$0
Total Notes and Other Secs. Received (line 9, page 2C)	\$0	\$0	\$0	\$0	\$0
Total Loans and Investments (line 10, page 2C)	\$0	\$0	\$0	\$0	\$0

1 B. SMALLER ENTERPRISE FINANCINGS

1 Cumulative dollar amount of Smaller Enterprise Financings extended between April 25, 1994 and close of reporting fiscal year.

[] \$0

2 Cumulative dollar amount of all Financing extended between April 25, 1994 and close of reporting fiscal year.

[] \$0

3 Percentage of total Financings extended to Smaller Enterprises (line 1 divided by line 2)

[] 0.00%

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 3 MONTHS ENDED**

OMB Approval No. 3245-0063
Expiration Date 10/31/2017

Name of the 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 Exp. Comments :			
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 NONCASH GAINS/INCOME as of

OMB Approval No. 3245-0063

Expiration Date 10/31/2017

Name of the 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 Gains" 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.

Name of the 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
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II. REPURCHASE AGREEMENTS WITH FEDERALLY-INSURED INSTITUTION

Name and Location of Financial Institution	Maturity Date	Amount
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III. CERTIFICATES OF DEPOSIT ISSUED BY FEDERALLY-INSURED INSTITUTIONS

Name and Location of Financial Institution	Maturity Date	Amount
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IV. DEMAND DEPOSIT, MONEY MARKET, AND SAVING ACCOUNTS IN FEDERALLY-INSURED INSTITUTIONS

Name and Location of Financial Institution	Maturity Date	Amount
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V. OTHER CASH AND INVESTED IDLE FUNDS

Description	Maturity Date	Amount
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TOTAL CASH, CASH EQUIVALENTS AND IDLE FUNDS

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

QUARTERLY CERTIFICATIONS

OMB Approval No. 3245-0063

Expiration Date 10/31/2017

Name of Licensee:

License No.:

MANAGEMENT CERTIFICATION

I, the Chief Financial Officer of _____ (License), do hereby certify that the financial report for the 3 months ended _____ submitted by _____ (Licensee) to the Small Business Administration on SBA Form 468 is true and correct in all aspects. The statements and schedules listed below have been omitted from the submission.

STATEMENTS AND SCHEDULES OMITTED:

Total Assets:	\$0
Net Income(Loss):	\$0
Cash and Cash Equivalents at End of Period:	\$0

CAUTION: By signing below, you are certifying as to the truth and accuracy of the 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:	Name:	Signature:
	Title:	Title:
		Date:

SECRETARY'S CERTIFICATION

I, the duly elected, qualified and acting Secretary of _____ (License), do hereby certify as follows:

1. _____ (Licensee) is in good standing under the laws of the State of _____.
2. The minutes of the meeting of the Board of Directors of _____ (Licensee) on _____, document that the Board at such meeting, reviewed and approved the audited Annual Financial Report of such company for the 3 months ended _____.

CAUTION: By signing below, you are certifying as to the truth and accuracy of the 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:	Name:	Signature:
	Title:	Title:
		Date: