Selections Tab: Contains data used in drop down fields and other key information. This is a hid

Table Name	Key_Data
Description	Identifies the key fields selected/entered that are used throughout the form.

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Cash Flow Statement	4	16	✔	✔			✔	5&6-CF
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Wind-Down Plan Supplement Schedule A	24	24	as needed					WDSupA
Wind-Down Plan Supplement Schedule B	25	25	as needed					WDSupB
Key SBA Leverage Metrics	n/a	n/a	n/a					KeyMetrics
NAICS Search Tool	n/a	n/a	n/a					NAICS Search

Notes

1. Schedule 8 is only required for Accrual and Reinvestor SBICs. It should be completed as distributions are made and checked against statement of partners' capital.

2. Wind-Down Plans are only required for SBICs that are in Wind-Down, per 13 CFR 107.590.

Annual Financial Report
SBA FORM 468
Partnership SBICs

OMB Approval No. 3245-0063
Expiration Date 08/31/2026
Form Version 5.0

Name of Licensee:

License Number: 00/00-0001

Street Address:

City:
State: #N/A
Zip Code:
County:

Licensee Employer ID Number:

For the Reporting Period Ended:

Number of Months:

Filing Type:

Independent Public Accountant

Approved Valuation Guidance

Vintage Year:

Approved Tiers of Leverage:

Fund Style

Investment Strategy

Fund Style or Inv. Strategy Description

Has SBA Approved Wind-Down Plan?

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 FOR -MONTH PERIOD ENDED: 01/00/1900 (Amounts rounded to the nearest dollar)	OMB Approval No. 3245-0063 Expiration Date 08/31/2026	OMB Approval No. 3245-0063 Expiration Date 08/31/2026
Name of License:	License no.: 00/00-0001	License no.: 00/00-0001

		0		GAAP Value (if needed)	
ASSETS		Current Period End Audited	Prior Year End Audited	**Current Period End Audited**	**Prior Year End Audited**
LOANS AND INVESTMENTS (Current Period from Schedule 1)		12/30/1899		**12/30/1899**	**12/30/1899**
Portfolio Securities					
1 Loans Cost	*	$ -	$ -	$ -	$ -
2 Debt Securities Cost	*	-	-	-	-
3 Equity Securities Cost	*	-	-	-	-
4a Portfolio Securities at Cost		-	-	-	-
4b Appreciation on Portfolio Securities	*	-	-	-	
4c Depreciation on Portfolio Securities	*	-	-	-	
4d Total Portfolio Securities at Value		-	-	-	-
Assets Acquired in Liquidation of Portfolio Securities:					
5 Receivables from Sale of Assets Acquired Cost	*	-	-		-
6 Assets Acquired Cost	*	-	-	-	-
7 Operating Concerns Acquired Cost	*	-	-	-	-
8 Notes and Other Securities Received Cost	*	-	-	-	-
9a Total Assets Acquired and Notes Received Cost (Lines 5-8)		-	-	-	-
9b Appreciation on Assets Acquired and Notes Received	*	-	-	-	
9c Depreciation on Assets Acquired and Notes Received	*	-	-	-	
9d Assets acquired and Notes Received Reported Value		-	-	-	-
10 Equity Investments in Relender/Reinvestors Exception					
a. Total Cost of Relender/Reinvestor Investments	*	-	-	-	-
b. Appreciation on Relender/Reinvestor Investments	*	-	-	-	
c. Depreciation on Relender/Reinvestor Equity Investments	*	-	-	-	
d. Total Relender/Reinvestor Investments Value		-	-	-	-
11a TOTAL LOANS AND INVESTMENTS COST (Line 4a + Line 9a + Line 10a)		-	-	-	-
11b TOTAL LOANS AND INVESTMENTS VALUE (Line 4d + Line 9d + Line 10d)		-	-	-	-
12 Less Current Maturities		-	-	-	-
13 Loans and Investments Net of Current Maturities		-	-	-	-
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		-	-	-	-
24a Other (specify)				-	-
24b Other (specify)		-	-	-	-
25 Total Current Assets		-	-	-	-
OTHER ASSET					
26 Net Furniture and Equipment		-	-	-	-
27 Net Leverage Fees		-	-	-	-
28a Other (specify)		-	-	-	-
28b Other (specify)		-	-	-	-
29 Total Other Assets (Sum of lines 26 through 28b)		-	-	-	-
30 TOTAL ASSETS		$ -	$ -	**$ -**	**$ -**

STATEMENT OF FINANCIAL POSITION FOR -MONTH PERIOD ENDED: 01/00/1900 (Amounts rounded to the nearest dollar)	OMB Approval No. 3245-0063 Expiration Date 08/31/2026	OMB Approval No. 3245-0063 Expiration Date 08/31/2026
Name of License:	License no.: 00/00-0001	License no.: 00/00-0001

LIABILITIES AND CAPITAL	$ -		**GAAP Value (if needed)**	
	Current Period End Audited	Prior Year End Audited	**Current Period End Audited**	**Prior Year End Audited**
LIABILITIES	12/30/1899		**12/30/1899**	**12/30/1899**
Long-Term Debt				
31 Notes and Debentures payable to or guaranteed by SBA.	$ -	$ -	$ -	$ -
32 Notes and Debentures Payable to Others	-	-	-	-
33 Total Long Term Liabilities (Line 31 + Line 32)	-	-	-	-
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	-	-	-	-
40a Other (specify)	-	-	-	-
40b Other (specify)	-	-	-	-
41 Total Current Liabilities (Sum of Lines 34 through 40b)	-	-	-	-
Other Liabilities				
42 Deferred Credits	-	-	-	-
43 Deferred Fee Income	-	-	-	-
44 Other (specify)	-	-	-	-
45 Total Other Liabilities	-	-	-	-
46 TOTAL LIABILITIES (Lines 33, 41, and 45)	-	-	-	-
PARTNERS' CAPITAL				
47 Private Partners' Contributed Capital				
a. General Partners' *	-	-	-	-
b. Limited Partners' *	-	-	-	-
Err:502				
c. Total Private Partners' Contributed Capital	-	-	-	-
48 Other (specify)	-	-	-	-
49 Unrealized Gains (Loss) on Securities Held (Sum of Lines 4b, 4c, 9b, 9c, 10b, 10c)	-	-	-	-
50 Non-Cash Gains/Income (Schedule 3, Column G and D) *	-	-	-	-
51 Undistributed Net Realized Earnings *	-	-	-	-
Err:502				
Err:502				
Err:502				
52 Undistributed Realized Earnings (line 50 plus line 51)	-	-	-	-
Err:502				
Err:502				
53 TOTAL PARTNERS' CAPITAL (Sum of Lines 47c, 48, 49, and 52)	-	-	-	-
54 TOTAL LIABILITIES AND PARTNERS' CAPITAL (Line 46 plus Line 53)	$ -	$ -	$ -	$ -
30 TOTAL ASSETS	-	-	-	-
Difference	-	-	-	-
Error Check (Assets equal Liabilities)				

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

STATEMENT OF OPERATIONS REALIZED
FOR MONTH PERIOD ENDED: 01/00/1900
(Amounts rounded to the nearest dollar)

Name of License: License no.: 00/00-0001

	Unaudited Current Quarter	Audited Year-to-Date through	Unaudited From Inception to
INVESTMENT INCOME	12/30/1899	12/30/1899	12/30/1899
1 Interest Income	$ -	$ -	$ -
2 Dividend Income	-	-	-
3 Income (Loss) from Investments in Partnerships / Flow-through Entities	-	-	-
4 Fees for Management Services	-	-	-
5 Application, Closing and Other Fees	-	-	-
6 Interest on Cash Equivalents and Invested Idle Funds	-	-	-
7 Income from Assets Acquired in Liquidation of Loans and Investments (net of Expenses)	-	-	-
8 Other Income	-	-	-
9 GROSS INVESTMENT INCOME	-	-	-
EXPENSES			
10 Interest Expense			
a. Interest Expense -- SBA Debentures	-	-	-
b. Other Interest Expense	-	-	-
c. Total Interest Expense	-	-	-
11 Commitment Fees & Other Financial Costs	-	-	-
12 Compensation and Benefits (Officer and Employee)	-	-	-
13 Investment Advisory and Management Services	-	-	-
14 Partners' Meetings	-	-	-
15 Appraisal and Investigation	-	-	-
16 Advertising, Communication and Travel	-	-	-
17 Cost of Space Occupied	-	-	-
18 Depreciation and Amortization			
a. Amortization of Leverage Fees	-	-	-
b. Other Depreciation and Amortization	-	-	-
c. Total Depreciation and Amortization	-	-	-
19 Insurance	-	-	-
20 Payroll and Other Taxes	-	-	-
21 Provision for Losses on Receivables (excluding loans receivable)	-	-	-
22 Legal Fees	-	-	-
23 Audit and Examination Fees	-	-	-
24 Miscellaneous Expenses			
a. Misc. #1	-	-	-
b. Misc. #2	-	-	-
c. Misc. #3	-	-	-
d. Misc. #4	-	-	-
e. Misc. #5	-	-	-
f. Misc. #6	-	-	-
24g Total Miscellaneous Expenses	-	-	-
25 TOTAL EXPENSES	-	-	-
26 NET INVESTMENT INCOME (LOSS)	-	-	-
27 NET REALIZED GAIN (LOSS) ON INVESTMENTS (1) *	-	-	-
Err:502			
Err:502			
28 NET INCOME (LOSS) BEFORE NONRECURRING ITEMS	-	-	-
29 Extraordinary Item	-	-	-
30 Cumulative Effect of Change in Accounting	-	-	-
31 NET INCOME (LOSS)	$ -	$ -	$ -

(1) Provide supporting detail for all realized gains and losses on Schedule 2, column 8.

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

STATEMENT OF CASH FLOWS
FOR MONTH PERIOD ENDED: 01/00/1900
(Amounts rounded to the nearest dollar)

Name of License: License no.: 00/00-0001

	Unaudited Current Quarterly Period Ended	Audited Year-to-Date Thru Period Ended	Unaudited From Inception to Period Ended
OPERATING ACTIVITIES	12/30/1899	12/30/1899	12/30/1899
Cash Inflows			
1 Interest Received from Portfolio Concerns	$ -	$ -	$ -
2 Dividend Received from Portfolio Concerns	-	-	-
3 Other Income Received from Portfolio Concerns	-	-	-
4 Management Services and Other Fees Received	-	-	-
5 Interest on Cash Equivalents and Invested Idle Funds	-	-	-
6 Cash Received from Assets Acquired in Liquidation	-	-	-
7 Other Operating Cash Receipts	-	-	-
Cash Outflows			
8 Interest Paid	-	-	-
9 Commitment Fees and Other Financial Costs	-	-	-
10 Investment Advisory and Management Fees	-	-	-
11 Partners' and Employees' Compensation and Benefits	-	-	-
12 Operating Expenditures (Excluding Compensation and Benefits)	-	-	-
13 Other Operating Cash Disbursements	-	-	-
Err:502			
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 Investment	-	-	-
23 Other (Specify)	-	-	-
24 NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES	$ -	$ -	$ -
FINANCING ACTIVITIES			
Cash Inflows			
25 Proceeds from Issuance of SBA-Guaranteed Debentures	$ -	$ -	$ -
26 Proceeds from Non-SBA Borrowing	-	-	-
27 Proceeds from Sale of Stock or Other Capital Contribution	-	-	-
28 Other (Specify)	-	-	-
Cash Outflows			
29 SBA Leverage Fees	-	-	-
30 Principal Payments on SBA-Guaranteed Debentures	-	-	-
31 Principal Payments on Non-SBA Borrowing	-	-	-
32 Redemption of Private Partnership Interests	-	-	-
33 Other Distributions Paid	-	-	-
34 Other (Specify)	-	-	-
35 NET CASH PROVIDED BY (USED IN) FINANCING ACTIVITIES	$ -	$ -	$ -

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

STATEMENT OF CASH FLOWS
FOR MONTH PERIOD ENDED: 01/00/1900
(Amounts rounded to the nearest dollar)

Name of License: License no.: 00/00-0001

Cash Flow Page 2 of 2

	Unaudited Current Quarterly Period Ended	Audited Year-to-Date Thru Period Ended	Unaudited Since Inception to Period Ended
	12/30/1899	12/30/1899	12/30/1899
Lines 36 through 38 include Cash and Cash Equivalents and Idle Funds			
36 INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	$ -	$ -	$ -
37 CASH AND CASH EQUIVALENTS AT BEGINNING OF PERIOD	-	-	-
38 CASH AND CASH EQUIVALENTS AT END OF PERIOD	-	-	-
From Lines 14 and 15 on Balance Sheet, page 2	-	-	-
RECONCILIATION OF NET INCOME (LOSS) TO NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES			
39 Net Income (Loss) (Line 31, page 4P)	-	-	-
Adjustments to Reconcile Net Income (Loss) to Net Cash Provided by (used in) Operating Activities:			
40 Depreciation and Amortization (line 18, page 4P)	-	-	-
41 Provision for Losses on Accounts Receivable (line 21, page 4P)	-	-	-
42 Realized (Gains) Losses on Investments (line 27, page 4P)	-	-	-
43 Other (Specify)			
a.	-	-	-
b.	-	-	-
c.	-	-	-
Changes in Operating Assets and Liabilities Net of Noncash Items			
44 (Increase) Decrease in Interest and Dividends Receivable	-	-	-
45 (Increase) Decrease in Other Current Assets	-	-	-
46 Increase (Decrease) in Accounts Payable	-	-	-
47 Increase (Decrease) in Accrued Interest Payable	-	-	-
48 Increase (Decrease) in Accrued Taxes Payable	-	-	-
49 Increase (Decrease) in Distributions Payable	-	-	-
50 Increase (Decrease) in Other Current Liabilities	-	-	-
51 Other (Specify)	-	-	-
52 Other (Specify)	-	-	-
53 NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES (Total must agree with line 14 above)	$ -	$ -	$ -
Line 14:	$ -	$ -	$ -
Error Check (Line 53 must equal Line 14)			

STATEMENT OF PARTNERS' CAPITAL
FOR MONTH PERIOD ENDED: 01/00/1900
(Amounts rounded to the nearest dollar)

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

PART I. PRIVATE PARTNERS' CONTRIBUTED CAPITAL

	General Partner(s) (2&3-Bal, line 47a)	Limited Partner(s) (2&3-Bal, line 47b)	Total
1 BALANCE AT BEGINNING OF PERIOD	$ -	$ -	$ -
2 ADDITIONS:			
a. Partnership interests issued for cash	-	-	-
b. Partnership interests issued for services rendered	-	-	-
c. Partnership interests issued for contributed non-cash assets	-	-	-
d. Capitalization of Retained Earnings Available for Distribution	-	-	-
e. Other credits (specify)	-	-	-
Err:502			Err:502
3 Total additions (sum of 2a through 2e)	-	-	-
4 Subtotal (line 1 plus line 3)	-	-	-
5 DEDUCTIONS:			
a. Liquidation of Partnership interests	-	-	-
Err:502			
Err:502			
b.Other debits (specify)	-	-	-
6 Total deductions (sum of 5a through 5b)	-	-	-
7 BALANCE AT END OF PERIOD (line 4 minus line 6) --	$ -	$ -	$ -
Totals must agree with lines 46a through 46c, page 3P	-	-	-

PART II. UNDISTRIBUTED REALIZED EARNINGS

	Noncash Gain/Income (1)	Undistributed Net Realized Earnings(2)	Undistributed Realized Earnings (1+2)
1 BALANCE AT BEGINNING OF PERIOD	* $ -	* $ -	$ -
2 ADDITIONS:			
a. Net investment income	-	-	-
b. Realized gain (loss) on investments	-	-	-
c. Gain on appreciation of securities distributed in kind	-	-	-
d. Other (specify)	-	-	-
3 Total additions (sum of 2a through 2d)	-	-	-
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 50, 51, and 52, page 3	$ -	$ -	$ -

I. RETAINED EARNINGS AVAILABE FOR DISTRIBUTION
II. REGULATORY AND LEVERAGEABLE CAPITAL
FOR MONTH PERIOD ENDED: 01/00/1900
(Amounts rounded to the nearest dollar)

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

PART I. RETAINED EARNINGS AVAILABLE FOR DISTRIBUTION OR CAPITALIZATION

1 Undistributed net Realized Earnings (line 51, 2&3-Bal)	$ -
2 LESS: Unrealized Depreciation (S1AB - Total Unrealized Depreciation)	-
3 RETAINED EARNINGS AVAILABLE FOR DISTRIBUTION OR CAPITALIZATION	$ -

PART II. SCHEDULE OF REGULATORY AND LEVERAGEABLE CAPITAL

1 Private Partners' Contributed Capital (line 47c, 2&3-Bal)		$ -
2 ADD		
a. Unfunded binding commitments from Institutional Investors	-	
b. Waived management fees credited as capital contributions	-	
c. Total Additions (Sum of Line 2a and 2b)		-
3 LESS: Regulatory Distributions		
a. Organization Expenses Not Approved by SBA (1)	-	
b. Partnership interests Issued for Services	-	
c. Partnership interests Issued for Non-cash Assets (unless approved by SBA for inclusion in Regulatory Capital or converted to cash)	-	
Err:502		
d. Other credits (specify)	-	
4 Total Regulatory Deductions (Sum of 3a through 3d		-
5 Other Adjustments to Regulatory Capital (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 III. CUMULATIVE PRIVATE INVESTOR CAPITAL CONTRIBUTIONS, DISTRIBUTIONS AND FUND INVESTMENT PERFORMANCE
(for SBICs licensed on or after January 1, 1994)
As of 12/30/1899

1 All Private Capital Contributions Ever Paid-In	$ -
2 All CASH Distributions to Private Investors Ever Paid Out - Including Fair Market Value of Non-Cash Distributions	-

NOTES

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

SCHEDULE 1

OMB Approval No. 3245-0063

Expiration Date 08/31/2026

Name of License:

Investment Data Expressed in $

Summary by Investment Type

	Total Cash Invested (A)
Total Equity Capital Investments	
Loan	$ -
Debt	-
Equity	-
Portfolio Securities	-
Receivables from Sale of Assets Acquired	-
Assets Acquired	-
Operating Concerns Acquired	-
Notes and Other	-
Equity in Reinvestor/Relender Exception	-
Totals	$ -

Expand to see totals by investment type.

Portfolio companies must be first entered in Schedule 11.

Portfolio Company Name	Employer ID	Critical Technology *(if applicable)*	Financing Type	Investment Type	Financing Description	Initial Financing Date	Equity Capital Investment	Interest or Dividend Rate	Ownership % (Fully Diluted)	Restructured?	Loan/ Debt Status	Total Cash Invested (A)

SCHEDULE 1 | SCHEDULE OF LOANS AND INVESTMENTS | OMB Approval No. 3245-0063

OMB Approval No. 3245-0 | FOR MONTH PERIOD ENDED: 01/00/1900 | Expiration Date 08/31/2026

Expiration Date 08/31/202

Name of License: | License no.: 00/00-0001

Investment Data Expresse

	Investment Data (Expressed in $)												Inv. Multiple: SBA Value (B+D)/A		Inv. Multiple: GAAP Value (C+D)/A	
	Cost at Beginning Period	**Addition/ Deduction**	**Non Cash in Cost at End of Period**	**Cost at End of Period**	**Unrealized Appreciation**	**(Unrealized Depreciation)**	**Class 1**	**Class 2**	**Class 2 Date of Up Round**	**SBA Reported Value (B)**	**GAAP Reported Value (C)**	**Unaudited Cum. Cash Proceeds (D)**	**Current SBA Mult**	**Prior SBA Mult**	**Current GAAP Mult**	**Prior GAAP Mult**
				$ -												
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -				
	-	-	-	-	-	-	-	-		-	-	-				
	-	-	-	-	-	-	-	-		-	-	-				
	-	-	-	-	-	-	-	-		-	-	-				
	-	-	-	-	-	-	-	-		-	-	-				
	-	-	-	-	-	-	-	-		-	-	-				
	-	-	-	-	-	-	-	-		-	-	-				
	-	-	-	-	-	-	-	-		-	-	-				
	-	-	-	-	-	-	-	-		-	-	-				
Expand to see totals by in	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -				

Portfolio companies must *

Portfolio Company Name	**Cost at Beginning Period**	**Schedule 1C Reference Number**	**Addition/ Deduction**	**Non-Cash Gain included in Cost at End of Period**	**Cost at End of Period**	**Unrealized Appreciation**	**(Unrealized Depreciation)**	**Class 1**	**Class 2**	**Class 2 Date of Up Round**	**SBA Reported Value (B)**	**GAAP Reported Value (C)**	**Unaudited Cum. Cash Proceeds (D)**	Inv. Multiple: SBA Value (B+D)/A **Current SBA Mult**	**Prior SBA Mult**	Inv. Multiple: GAAP Value (C+D)/A **Current GAAP Mult**	**Prior GAAP Mult**	**First Investment Date**
			$ -		$ -						$ -	$ -						
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Portfolio Company Name	Employer ID	Critical Technology *(if applicable)*	Financing Type	Investment Type	Financing Description	Initial Financing Date	Equity Capital Investment	Interest or Dividend Rate	Ownership % (Fully Diluted)	Restructured?	Loan/ Debt Status	Total Cash Invested (A)

Portfolio Company Name	Cost at Beginning Period	Schedule 1C Reference Number	Addition/ Deduction	Non-Cash Gain included in Cost at End of Period	Cost at End of Period	Unrealized Appreciation	(Unrealized Depreciation)	Class 1	Class 2	Class 2 Date of Up Round	SBA Reported Value (B)	GAAP Reported Value (C)	Unaudited Cum. Cash Proceeds (D)	Current SBA Mult	Prior SBA Mult	Current GAAP Mult	Prior GAAP Mult	First Investment Date
			-		-						-	-						
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SCHEDULE 1 A/B

1A. SUMMARY OF LOANS AND INVESTMENTS

1B. SMALLER ENTERPRISE FINANCINGS

FOR MONTH PERIOD ENDED: 01/00/1900

OMB Approval No. 3245-0063

Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

1A. SUMMARY OF LOANS AND INVESTMENTS

A	B	C	D	E	F	G	H
Investment Category	**Cost at Beginning of Period**	**Additions/ (Deductions)**	**Cost at End of Period**	**Unrealized Appreciation**	**Unrealized Depreciation**	**SBA Reported Value**	**GAAP Reported Value**
Total Loans	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Total Debt Securities	-	-	-	-	-	-	-
Total Equity Securities	-	-	-	-	-	-	-
Totals	-	-	-	-	-	-	-
Total Assets Acquired	-	-	-	-	-	-	-
Total Operating Concerns Acquired	-	-	-	-	-	-	-
Total Notes and Other Secs. Received	-	-	-	-	-	-	-
Equity Investments in Relenders/ReInvestors	-	-	-	-	-	-	-
Total Loans and Investments	$ -	$ -	$ -	$ -	$ -	$ -	$ -

1B. SMALLER ENTERPRISE FINANCINGS

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

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

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

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

SCHEDULE 1C

SCHEDULE OF ADDITIONS AND DEDUCTIONS TO LOAN AND INVESTMENT COST

FOR MONTH PERIOD ENDED: 01/00/1900

OMB Approval No. 3245-0063

Expiration Date 08/31/2026

Name of License: License no.: 00/00-0001

	Additions	Deductions	Net Changes
Totals	$ -	$ -	$ -

A	B	C	D	E	F	G	H	I
Portfolio Company Name	**Employer ID**	**Reference Number**	**Reference ID**	**Transaction Date**	**Description of Addition / Deduction to Loan and Investment Cost**	**Addition/ Deduction Amount**	**Change to Cost**	**Notes**
			-				$ -	
			-				-	
			-				-	
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SCHEDULE 2

SCHEDULE OF REALIZED GAINS AND LOSSES ON LOANS AND INVESTMENTS
FOR MONTH PERIOD ENDED: 01/00/1900

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Expand to see totals for most recent quarter.

	Cost	Net Sales Price	Realized Gain/(Loss)	Cash	Note	Equity
Current quarter	$ -	$ -	$ -	$ -	$ -	$ -
Totals Through Period End	$ -	$ -	$ -	$ -	$ -	$ -

A	B	C	D	E	F	G	H	I	J	K	L	M	N
								Components of Net Sales Price			**Applies to Sales and Exchanges**		
Portfolio Company Name	**Employer ID**	**Financing Type**	**Transaction Date**	**Transaction Type**	**Cost**	**Net Sales Price**	**Realized Gain/(Loss)**	**Cash**	**Note**	**Equity**	**Name**	**Address**	**Comments**
							$ -			$ -			
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SCHEDULE 3	SCHEDULE OF NONCASH GAINS/INCOME FOR MONTH PERIOD ENDED: 01/00/1900	OMB Approval No. 3245-0063 Expiration Date 08/31/2026
Name of License:		License no.: 00/00-0001

	Balance at Beginning of Period	Additions	Collections During Period	Balance at End of Period	Amount of "includible non-cash gains" for Capital Impairment
Totals	$ -	$ -	$ -	$ -	$ -

A	B	C	D	E	F	G	H
Portfolio Company Name	**Employer ID**	**Description of Non-cash Gains/Income (1)**	**Balance at Beginning of Period**	**Additions**	**Deductions / Collections**	**Balance at End of Period**	**Amount of "includible non-cash gains" for Capital Impairment**
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SCHEDULE 4

SCHEDULE OF DELINQUENT LOANS AND INVESTMENTS
FOR MONTH PERIOD ENDED: 01/00/1900

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Totals		$ -	$ -		$ -				$ -	$ -	$ -

Note (1) Days Past Due based on oldest delinquency.

A	B	C	D	E	F	G	H	I	J	K	L
			Delinquent Principal		Delinquent Interest		Date of Last Payment		Amount of Last Payment		
Portfolio Company Name	Employer ID	Outstanding Principal Balance	Amount Past Due	Days Past Due (1)	Amount Past Due	Days Past Due (1)	Principal	Interest	Principal	Interest	Fair Market Value of Collateral
		$ -	$ -		$ -		$ -	$ -	$ -	$ -	$ -

A	B	C	D	E	F	G	H	I	J	K	L
			Delinquent Principal		Delinquent Interest		Date of Last Payment		Amount of Last Payment		
Portfolio Company Name	Employer ID	Outstanding Principal Balance	Amount Past Due	Days Past Due (1)	Amount Past Due	Days Past Due (1)	Principal	Interest	Principal	Interest	Fair Market Value of Collateral

SCHEDULE 5

SCHEDULE OF COMMITMENTS

FOR MONTH PERIOD ENDED: 01/00/1900

OMB Approval No. 3245-0063

Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Total $ -

A	B	C	D	E	F	G	H
Portfolio Company Name	**Employer ID**	**Amount of Commitment**	**Date Made**	**Expiration Date**	**Security Type**	**Investment Type**	**Commitment Type**
		$ -					

A	B	C	D	E	F	G	H
Portfolio Company Name	**Employer ID**	**Amount of Commitment**	**Date Made**	**Expiration Date**	**Security Type**	**Investment Type**	**Commitment Type**

A	B	C	D	E	F	G	H
Portfolio Company Name	Employer ID	Amount of Commitment	Date Made	Expiration Date	Security Type	Investment Type	Commitment Type

SCHEDULE 6

SCHEDULE OF GUARANTEES

FOR MONTH PERIOD ENDED: 01/00/1900

OMB Approval No. 3245-0063

Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Total $ -

A	B	C	D	E	F	G	H
Portfolio Company Name	**Employer ID**	**Guarantee Amount**	**Date Made**	**Expiration Date**	**Name of Guaranteed Party**	**Is guarantee collateralized?**	**Description of underlying obligation of Small Business**
		$ -					

SCHEDULE 6

SCHEDULE OF GUARANTEES

FOR MONTH PERIOD ENDED: 01/00/1900

OMB Approval No. 3245-0063

Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Total $ -

A	B	C	D	E	F	G	H
Portfolio Company Name	**Employer ID**	**Guarantee Amount**	**Date Made**	**Expiration Date**	**Name of Guaranteed Party**	**Is guarantee collateralized?**	**Description of underlying obligation of Small Business**

SCHEDULE 7	SCHEDULE OF CASH AND INVESTED IDLE FUNDS FOR MONTH PERIOD ENDED: 01/00/1900	OMB Approval No. 3245-0063 Expiration Date 08/31/2026
Name of License:		License no.: 00/00-0001

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

Description	Maturity Date	Amount
		$ -

II. REPURCHASE AGREEMENTS WITH FEDERALLY-INSURED INSTITUTION

Name and Location of Financial Institution	Maturity Date	Amount
		-

III. CERTIFICATES OF DEPOSIT ISSUED BY FEDERALLY-INSURED INSTITUTIONS

Name and Location of Financial Institution	Maturity Date	Amount
		-

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

Name and Location of Financial Institution	Maturity Date	Amount
		-
		-
		-
		-

V. OTHER CASH AND INVESTED IDLE FUNDS

Description	Maturity Date	Amount
		-
		-
		-

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

Expand co

SCHEDULE 8	DISTRIBUTION SCHEDULE	OMB Approval No. 3245-0063
	FOR MONTH PERIOD ENDED: 01/00/1900	Expiration Date 08/31/2026
Only required for Accrual and Reinvestor SBICs		
Name of License:		License no.: 00/00-0001

A. SBA SHARE PERCENTAGE

1	Total SBA Intended Leverage Commitment	$ -
2	Total Private Capital Commitment	$ -
3	SBA's Share Percentage	0.0%

B. DISTRIBUTIONS	1	2	3	4	5
1 Distribution Date					
2 Accrued Interest Paid	$ -	$ -	$ -	$ -	$ -
3 Annual Charge Paid	-	-			
4 Total Distributions After Accrued Interest & Annual Charges	-	-			
5 SBA Share					
a. SBA Calculated Share	-	-	-	-	-
b. Beginning SBA Leverage Balance	-				
c. Minimum Amount to SBA Leverage Redemption	-	-	-	-	-
d. Amount to SBA Leverage	-				
e. Ending SBA Leverage Balance	-	-	-	-	-
f. Beginning SBA Outstanding Commitments	-				
g. Minimum Amount of SBA Commitments to Cancel	-	-	-	-	-
h. Amount of Commitments Being Cancelled	-				
i. Ending SBA Outstanding Commitments	-	-	-	-	-
6 Distributions to Private Investors					
a. Amount Available to Private Investors	-	-	-	-	-
1) Amount Distributed to Private Investors & GP	-				
2) Amount to Carried Interest	-				
3) Amount to Investors After Carried Interest	-	-	-	-	-
b. Return of Capital Distributions					
1) Beginning Leverageable Capital	-	-			
2) Beginning Regulatory Capital	-	-			
3) Amount of 6.a.1 Distributed as Return of Capital	-	-			
4) Ending Leverageable Capital	-	-	-	-	-
5) Ending Regulatory Capital	-	-	-	-	-
c. Amout of 6.a.1 Distributed as READ	-	-	-	-	-

SCHEDULE 9	SCHEDULE OF ACTIVITY FOR MONTH PERIOD ENDED: 01/00/1900	OMB Approval No. 3245-0063 Expiration Date 08/31/2026
If not in Wind-down. Please complete.		
Name of License:		License no.: 00/00-0001

PART I. FIRST ACTIVITY TEST

1. Cash and Cash Equivalents (line 14, page 2) $0	$ -
2. Invested Idle Funds (line 15, line 2)	-
3. Total Cash and Idle Funds	-
4. Total Assets at Cost:	
a. Total Assets (line 30, page 2)	-
b. ADD: Unrealized Depreciation (line 4c, 9c, and 10c Current Period, page 2)	-
c. LESS: Unrealized Appreciation (lines 4b, 9b, and 10b Current Period, page 2)	-
d. Total Assets at Cost	-
5. Line 3 Divided by Line 4d (expressed as a percentage)	0%

*Part I Status: ***Passes Part I***

*Note: IF LINE 5 IS LESS THAN OR EQUAL TO 20%, 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	-
9. Line 7 divided by Line 8 (expressed as a percentage)	0%

*Part II Status: ***Passed Part I***

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

Partnership

CERTIFICATIONS

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

Name of License: License no.: 00/00-0001

MANAGEMENT CERTIFICATION

I, [, a General Partner of (Licensee),] [, a General Partner of the General Partner of (Licensee),]

I, , a Managing Member of , the General Partner of (Licensee),]

[, the President of , the General Partner of (Licensee),]

do hereby certify as follows:

1. The audited Annual Financial Report for the fiscal year ended January 00, 1900 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.

2. The General Partner of (Licensee) has reviewed and approved the audited Annual Financial Report for the fiscal year ended January 00, 1900.

3. (Licensee) is in good standing under the laws of the State of .

4. (Licensee) has filed all federal, state and local tax returns required through the date hereof, including but not limited to payroll tax returns and informational returns for income tax purposes.

STATEMENTS AND SCHEDULES OMITTED:

Total Assets:	$ -
Net Income (Loss):	$ -
Cash and Cash Equivalents and Idle Funds at End of Period:	$ -

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.

The undersigned certifies that the attached SBA Form 468 was prepared using the MS Excel Workbook Form provided by SBA, without modification to any aspect of that Form and the formulae contained therein, other than the addition of Licensee data and information (as contemplated by the instructions provided by SBA).

Date: Name: Signature:

Title:

Schedule 10 Unaudited SBIC Licensee Customer Relationship Management Information
FOR MONTH PERIOD ENDED: 01/00/1900

Name of License:

Note: Demographic information is on a voluntary basis only.

Last Name	First Name	Title	Role Type	Phone	Email	GP Ownership %	Fund Carry % (optional)	Management Company Ownership %

Schedule 10

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Note: Demograp

				Voluntary Demographic Information ("x" all that apply)														
				Gender				Ethnicity			Race							
Last Name	Investment Committee Member	Primary SBA Contact	SBA Mailing List?	Male	Female	X	Prefer Not to Disclose	Non-Hispanic or Latino	Hispanic or Latino	Prefer Not to Disclose	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or Other Pacific Islander	White	Prefer Not to Disclose	Veteran	Persons with Disabilities

SCHEDULE 11

UNAUDITED SBIC CUMULATIVE INVESTMENT

PERIOD ENDED: 01/00/1900

Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Include all investments, both realized and unrealized, made by the SBIC since the fund commencement date or October 1, 1993, whichever is later. If historical information is unavailable in the format requested, you may omit (1) investments realized or written off on or before June 30, 2011, and (2) for investments held as of July 1, 2011, gross receipts received on or before June 30, 2011.

Note 1 - Gross Receipts to Total Dollars Invested

Note 2 - (Gross Receipts + GAAP Fair Market Value) to Total Dollars Invested

	Number of Portfolio Companies	Number of Investments Since Inception	Total Dollars Invested	Gross Receipts Cash	Gross Receipts Equity	Total	SBA Reported Value	GAAP Reported Value	Cash Mult. See Note 1	Mult. See Note 2
Totals	-	-	$ -	$ -	$ -	$ -	$ -	$ -	0.00x	0.00x

A	B	C	D	E	F	G	H	I	J	K	L	M	N
							Gross Receipts			*Columns J and K pulled from Schedule 1.*			
Portfolio Company Name	Employer ID	Smaller Enterprise?	Realization Status	Date of 1st Investment	Number of Investments Since Inception	Total Dollars Invested	Gross Receipts Cash	Gross Receipts Equity	Total Receipts	SBA Reported Value	GAAP Reported Value	Cash Mult. See Note 1	Mult. See Note 2
							$ -	$ -	$ -	$ -	$ -		
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									-	-	-		
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SCHEDULE 11

Name of License:

Include all investments
format requested, you

Note 1 - Gross Receipts
Note 2 - (Gross Receipt

A							

	Jobs Data**						
Portfolio Company Name	**Full-time Employees #**	**Part-time Employees #**	**Total # of Employees**	**Net Employee Count Increase/Decrease in last 12 months**	**# of Employees with Company Equity Ownership**	**Average Employee Tenure (years)**	**Median Salary**

SCHEDULE 11

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Include all investments
format requested, you

Note 1 - Gross Receipts
Note 2 - (Gross Receipt

***Owner defined as ownership >50% equity shares in the company.**
****Reinvestor SBICs use Appendix B for underlying funds demographic information and portfolio company jobs data. Do not complete via this form.**

A	O	P	Q	R	S	T	U	V	W	X	Y
	Voluntary Demographic Information**										
	Founder and/or Majority Owner*					CEO or Equivalent					
Portfolio Company Name	Founder or Owner Veteran	Founder or Owner Gender	Founder or Owner Race	Founder or Owner Ethnicity	Founder - Person with Disabilities	CEO or Equivalent Veteran	CEO or Equivalent Gender	CEO or Equivalent Race	CEO or Equivalent Ethnicity	CEO or Equivalent Person - with Disabilities	

SCHEDULE 12

UNAUDITED PORTFOLIO COMPANY INFORMATION
FOR MONTH PERIOD ENDED: 01/00/1900

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

NAICS Search

Name of License:

License no.: 00/00-0001

Portfolio Co:						Employer ID	#NAME?
1st Date Invested:	12/30/1899			Fund Own%	0%	Invest. Allocation	
NAICS				Associate Own%		Invested Capital	$ -
HQ City		HQ State		Management Own%		Realized Proceeds	$ -
EV at 1st Closing:	$ -			Board Representation		GAAP Value	$ -
Ticker Symbol:		*(if applicable)*	SBIC Board Member(s):	*Name* *Name*	Name	Investment Multiple	-
SBA Reported Value	$ -			Vote%		Gross IRR	

INVESTMENT BACKGROUND

Portfolio Company Description

Provide a short description of the company(elevator pitch) that discusses what the company does and its competitive advantages

CO-INVESTORS & CREDITORS

Identify key co-investors and creditors in the company

Investment Description

INVESTMENT THESIS / EXPECTATIONS

RECENT EVENTS & COMPANY UPDATES

FINANCIAL RESULTS

	At Closing	FYE	FYE	TTM		At Closing	FYE	FYE	TTM
As of Date	12/30/1899				As of Date	12/30/1899			
Revenue					TEV				
YOY % Growth					TEV Multiple				
EBITDA					Total Leverage				
YOY % Growth					Total Lev Multiple				
EBITDA Margin					Operating Cashflow				
Adj. EBITDA					Monthly Burn Rate				

Portfolio Co:						Employer ID	00-0000000
1st Date Invested:	12/30/1899			Fund Own%	0%	Invest. Allocation	
NAICS				Associate Own%		Invested Capital	$ -
HQ City		HQ State		Management Own%		Realized Proceeds	$ -
EV at 1st Closing:	$ -			Board Representation		GAAP Value	$ -
Ticker Symbol:		*(if applicable)*	SBIC Board Member(s):	*Name* *Name*	Name	Investment Multiple	-
SBA Reported Value	$ -			Vote%		Gross IRR	

INVESTMENT BACKGROUND

Portfolio Company Description

CO-INVESTORS & CREDITORS

Investment Description

INVESTMENT THESIS / EXPECTATIONS

RECENT EVENTS & COMPANY UPDATES

FINANCIAL RESULTS

	At Closing	FYE	FYE	TTM		At Closing	FYE	FYE	TTM
As of Date	12/30/1899				As of Date	12/30/1899			
Revenue					TEV				
YOY % Growth					TEV Multiple				
EBITDA					Total Leverage				
YOY % Growth					Total Lev Multiple				
EBITDA Margin					Operating Cashflow				
Adj. EBITDA					Monthly Burn Rate				

UNAUDITED EXECUTIVE SUMMARY
FOR MONTH PERIOD ENDED: 01/00/1900
(Amounts rounded to the nearest dollar)

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

Name of License:		License no.: 00/00-0001
Strategy:	0	Vintage Year 0

a. Firm Data

1. Assets under Management (including unfunded commitments)	$ -
2. Number of active funds	
3. Number of active portfolio companies	
4. Number of active and inactive funds	
5. Firm established year	
6. Total number of investment professionals at the firm	
7. Total number of employees at the firm	
8. Does your firm have a formal diversity, equity, and inclusion policy?	
9. Does your firm have a formal ESG or Responsible Investing policy?	
10. Do you offer the following benefits to all full-time employees?	
a. 401(k) match or retirement savings	
b. Medical insurance	
c. Paid Family Leave	
d. Childcare services or reimbursement	

b. Fund Level Data

	Private Investor	SBA
1. Total commitments	$ -	
2. Total calls/draws since inception	-	-
3. Remaining commitments	-	-
4. Total number of portfolio companies invested in since inception (from Schedule 11)	0	
5. Total amount of investments since inception (from Schedule 11)	-	
6. Gross receipts/proceeds from investments since inception (from Schedule 11)	-	
7. Gross distributions including carried interest	-	
8. Amount of carried interest paid	-	
9. Distributions to private investors net of carried interest and expenses	-	
10. SBA Leverage Repayment		-
11. GAAP Value of Remaining Loans and Investments (from Schedule 11)	$ -	
12. SBA Value of Remaining Loans and Investments (from Schedule 11)	$ -	

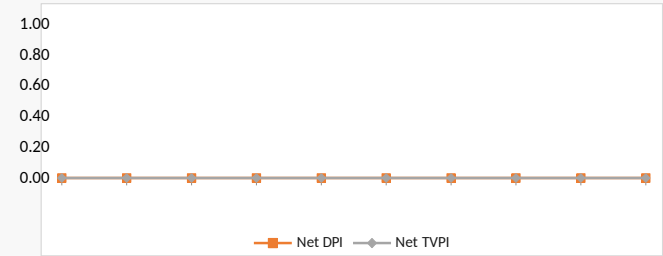
c. Key Valuation Metrics

All "net" figures are net to investors of expenses fees, and carried interest). Net RVPI cells are editable.

	MOIC	Net DPI	Net RVPI	Net TVPI	Net IRR	Gross IRR
GAAP Valuation			#DIV/0!			
SBA Valuation			#DIV/0!			

d. Historical Fund Performance

(Net DPI and Net TVPI not calculated based on GAAP should be annotated with an "" in column L)*



Date	Net DPI	Net TVPI

e. Portfolio breakdown of total invested capital to-date by industry, asset type, location, and stage invested.
(Top 5 in descending order)

Total Invested: $ -

Industry	Invested $	%
	$ -	
	-	
	-	
	-	
	-	
Other	-	

State	Invested $	%
	$ -	
	-	
	-	
	-	
	-	
Other	-	

Stage	Invested $	%
	$ -	
	-	
	-	
	-	
	-	
Other	-	

Asset Type	Invested $	%
	$ -	
	-	
	-	
	-	
Other	-	

f. Annual Narrative

For the fiscal year ended, the Licensee should discuss the following:

1. Major positive and negative events which affected overall performance including exits / distributions / write-downs / write-ups
2. 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.
3. Management changes.
4. Any lawsuits or other events giving rise to contingent liabilities.

Unaudited SBA Form 468 Wind-Down Plan Supplement

OMB Approval No. 3245-0063

As of 12/30/1899

Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Note: Detail for proceeds from income and exits and follow-on investments are on separate schedules.

I. Capital & Beginning Balances

A. Cash & Cash Equivalents and Idle Funds Balance $ -

	B. Private Capital		**C. SBA Leverage**
Total Private Capital Committed to Fund	$ -		
Total Private Capital Paid In	-	Total SBA Leverage Drawn	$ -
Total Return of Capital Distributions		Total Redemptions	-
Total READ Distributions			
Leverageable Capital Balance	-	SBA Leverage Balance	-
Unfunded Regulatory Commitments	-	Unfunded SBA Leverage Commitments	-
Regulatory Capital	-		

II. Pro Forma Cash Flows

In $	12/31/1899 12/31/1900	1901	1902	Post 1902	Pro Forma Total	Comments
A. Cash Inflows						
1. Private Capital Draws (Paid In)	$ -	$ -	$ -	$ -	$ -	
2. SBA Leverage/Loan Draws					-	
3. Idle Interest & Other Income					-	
Loan & Investment Income/Proceeds (Sched A)	-	-	-	-	-	*See Wind Down Schedule A.*
5. Other Cash Inflows						
Total Cash Inflows	-	-	-	-	-	
B. Cash Outflows						
1. Expenses						
a. Management Fees					-	
b. SBA Interest, Leverage Fees, & Annual Charges					-	
c. Other Expenses					-	
d. Total Expenses	-	-	-	-	-	
Investments (Follow-Ons) (Sched B)	-	-	-	-	-	*See Wind Down Schedule B.*
3. Private Investor Distributions						
a. READ					-	
b. Return of Capital					-	
c. Total Distributions to Private Investors	-	-	-	-	-	
4. SBA Leverage Redemptions					-	
5. Other Cash Outflows						
Total Cash Outflows	-	-	-	-	-	
C. NET CASH FLOW	$ -	$ -	$ -	$ -	$ -	

III. Ending Balances	12/30/1899				
Regulatory Capital	$ -	$ -	$ -	$ -	$ -
Leverageable Capital	-	-	-	-	-
SBA Leverage Balance	-	-	-	-	-
Cash & Cash Equivalents & Idle	-	-	-	-	-
Unfunded Private Commitments	-	-	-	-	-
Unfunded SBA Commitments	-	-	-	-	-

Unaudited SBA Form 468 Wind-Down Plan Supplement

Schedule A - SBIC Forecast Anticipated Income/Proceeds

As of 12/30/1899

OMB Approval No. 3245-0063

Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

TOTALS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -

Portfolio Company Name	Year First Invested	Cost of Invest.	468 SBA Approved Reported Value	Anticipated Exit Type	Anticipated Income/Exit Proceeds			Timing of Likely Exit Income/Proceeds				Comments
					Minimum	Maximum	Likely	01/01/1900 to 12/31/1900	1901	1902	Post 1902	
		$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	
		-	-								-	
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Unaudited SBA Form 468 Wind-Down Plan Supplement

OMB Approval No. 3245-0063

Schedule B - SBIC Forecast Financings

As of 12/30/1899

Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Anticipated Follow-on Financings

Company Name	Investment Type	Small Business Total Round/ Deal Size	SBIC's Pro-Rata Investment	SBIC Follow-on Participation	01/01/1900 to 12/31/1900	1901	1902	Post 1902	Comments
				Totals	$ -	$ -	$ -	$ -	
					Timing of SBIC Follow-On				
		$ -	$ -	$ -	$ -	$ -	$ -	$ -	
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Unaudited SBA Leverage Metrics
Based on Form 468 entries for period ended: 01/00/1900

OMB Approval No. 3245-0063
Expiration Date 08/31/2026

Name of License:

License no.: 00/00-0001

Expand rows to see how metrics are calculated.

I. Leverage Coverage Ratio (LCR)

LCR =

A. SBA Leverage Balance (Form 468, 2&3-Bal, Line 31)		$ -
B. Recoverable Assets		
+	Total Assets (Form 468, 2&3-Bal, Line 30)	$ -
-	Other Asset (Form 468, 2&3-Bal,Line 29)	$ -
-	Total Liabilities (Form 468, 2&3-Bal, Line 41)	$ -
	Net Asset Value	$ -
+	SBA Leverage Balance (Form 468, 2&3-Bal, Line 31)	$ -
+	Unfunded Regulatory Commitments (Form 468, 8-READ_Cap, Part II, Line 2a)	$ -
	Total Recoverable Assets	$ -
C. Leverage Coverage Ratio = Total Recoverable Assets/SBA Leverage Balance		

II. Capital Impairment Percentage (CIP)

CIP = 0.0% Max CIP: 0.0% | Within permissible maximum CIP

A.	PRELIMINARY IMPAIRMENT TEST			
1	Undistributed Net Realized Earnings (Deficit) (Form 468, 2&3-Bal, Line 51)			$ -
2	Includible Non-cash Gains (Form 468, S3NC)			$ -
3	Undistributed Net Realized Earnings (Deficit) plus Includible Non-Cash Gains			$ -
4	Unrealized Gain (Loss) on Securities Held (Form 468, 2&-Bal, Line 49)			$ -
	STOP -- Capital Impairment % = 0. No further calculations are required.			
B.	ADJUSTED UNREALIZED GAIN ON SECURITIES HELD			
	UNREALIZED APPRECIATION ON:			
5	Publicly Traded and Marketable securities ["Class 1" - Form 468 Schedule 1)			$ -
6	Non-Publicly Traded and Marketable securities which satisfy the requirements in Sec. 107.1840(d)(3) ["Class 2" - Form 468 Schedule 1)			$ -
7	All other securities ["Class 3" = Total Appreciation from Form 468 Schedule 1 minus Class 1 and Class 2]			$ -
8	Unrealized Depreciation (Schedule 1)			$ -
9	"Class 1" appreciation not used to offset depreciation	$ -	x 80% =	$ -
10	"Class 2" appreciation not used to offset depreciation	$ -	x 50% =	$ -
11	Adjusted Unrealized Gain before estimated tax effects			$ -
12	Less: Estimated future income taxes--if applicable*			$ -
13	Less: Class 1 or Class 2 Appreciation on pledged or encumbered securities (up to the amount of the related borrowing or obligation)*			$ -
	*Note: SBA may evaluate and assess.			
14	Adjusted Unrealized Gain on Securities Held			$ -
III.	CAPITAL IMPAIRMENT PERCENTAGE			
15	Undistributed Net Realized Earnings plus Includible Non-cash Gains			$ -
16	Adjusted Unrealized Gain (Loss) on Securities Held			$ -
17	Total (Line 15 + Line 16)			$ -
18	Regulatory Capital (excluding Treasury Stock, if any) (Form 468, 8-READ_Cap, Part II, Line 6)			$ -
19	CAPITAL IMPAIRMENT PERCENTAGE			**0.0%**
IV.	MAXIMUM PERMISSIBLE CAPITAL IMPAIRMENT PERCENTAGE			
20	If you are a Section 301(c) Licensee, enter C. If you are a Section 301(d) Licensee, enter D.			c
	SECTION 301(d) LICENSEES SKIP LINES 21-26			
21	SBA Leverage outstanding as of end of reporting period (Form 468, 2&3-Bal, Line 31)			$ -
22	Leverageable Capital as of end of reporting period (Form 468, 8-READ_Cap, Line 10)			$ -
23	Leverage Percentage			0%
24	Total portfolio investments at cost (Schedule 1, S1Inv)			$ -
25	Equity Capital Investments (Schedule 1, S1Inv)			$ -
26	Percentage of portfolio in Equity Capital Investments			0%
28	Maximum Permissible Capital Impairment Percentage			0%

Unaudited NAICS Search Tool. Copy NAICS 2022 Code and Title Result into NAICS field

Search (All)

Row Labels
111110: Soybean Farming
111120: Oilseed (except Soybean) Farming
111130: Dry Pea and Bean Farming
111140: Wheat Farming
111150: Corn Farming
111160: Rice Farming
111191: Oilseed and Grain Combination Farming
111199: All Other Grain Farming
111211: Potato Farming
111219: Other Vegetable (except Potato) and Melon Farming
111310: Orange Groves
111320: Citrus (except Orange) Groves
111331: Apple Orchards
111332: Grape Vineyards
111333: Strawberry Farming