ANNUAL FINANCIAL REPORT

ON SBA FORM 468

(Corporate SBICs)

OMB Approval No. 3245-0063

Expiration Date 10/31/2017

Name of Licensee:

License Number:

Street Address:

City, State, and Zip Code: , ,

County:

Employer ID Number:

For the Reporting Period Ending: Months: 12

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:		**Unrealized Depreciation**	**Unrealized Appreciation**	**Reported Value (1)**
LOANS AND INVESTMENTS	**Cost: (Col. 1)**	**(Col. 2)**	**(Col. 3)**	**(Col. 4)**
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
CURRENT ASSETS				
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
OTHER ASSET				
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**

SBA Form 468.1 (03/14) Previous edition obsolete.

STATEMENT OF OPERATIONS REALIZED
For 12 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 12 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)	$0	
Cash Outflows		
21 Purchase of Portfolio Securities	$0	
22 Loans to Portfolio concerns	$0	
23 Idle Funds Investment	$0	
24 Other (Specify)	$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)	$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)	$0	
38 NET CASH PROVIDED BY (USED IN) FINANCING ACTIVITIES		**$0**

STATEMENT OF CASHFLOW
12 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:

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**
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**
(Total must agree with line 15, page 5C)	

Supplemental disclsure of non-cash financing and investing activites 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 COMMITMENTS 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**	**Amount of Commitment**	**Date Made**	**Expiration Date**	**Loan, Debt, or Equity?**	**New investment or follow-on?**
	Total					

SCHEDULE OF GUARANTEES AS OF __, __, ____

OMB Approval No. 3245-0063
Expiration Date 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	01/01/2015 - Equity	$0	$0	$0

Other Notes:	Qualifies as start-up per CFR 107.50?			**Class I and II Appreciation:**	
				Class I Appreciation Amount:	$0
Smaller Enterprise?		Equity Capital?		Class II Appreciation Amount	$0
Comments:				If Class II, Date of Up Round?	

Equity Information:	Number of Shares:		**Loan/Debt Information:**	Status:	
Type of Shares:		Market /Liquidity:	Maturity Date:	Interest Rate:	
Equity Features: 0			Repay. Terms: Collateral :		
Warrants?	No	Expiration Date:	Date Investment Concluded:		

SCHEDULE 1 A/B

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

OMB Approval No. 3245-0063

Expiration Date 10/31/2017

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 (line1, 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 12 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
						Components of Net Sales Price			
Name of Small Business / Employer ID	**Security Type (1)**	**Transaction Type (2) / Date**	**Net Sales Price**	**Cost**	**Realized Gains / (Loss)**	**Cash**	**Note/ Maturity Date**	**Equity / Type**	**Name and Address of Purchaser (applies to sales and exchanges)**
/		/					/		
						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.

Schedule 4

SCHEDULE OF DELINQUENT LOANS AND INVESTMENTS 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	8	9	10	11
		Delinquent Principal:		**Delinquent Interest**		**Date of Last Payment**		**Amount of Last Payment**		
Name of Small Business / 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**
Total										

(1) Based on oldest delinquency.

Schedule 5	SCHEDULE OF CASH AND INVESTED IDLE FUNDS AS OF	OMB Approval No. 3245-0063 Expiration Date 10/31/2017
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

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 2C)

Schedule 6	SCHEDULE OF ACTIVITY AS OF	OMB Approval No. 3245-0063 Expiration Date 10/31/2017

Name of the Licensee: License No:

PART I. FIRST ACTIVITY TEST

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

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	$0
b. Debt	$0
c. Equity	$0
d. Guarantees	$0
7. Total (lines 6a through 6d)	$0
8. Regulatory Capital	$0
9. Line 7 divided by Line 8 (expressed as a percentage)	0%

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

Schedule 7	SHAREHOLDERS, OFFICERS, DIRECTORS AND MANAGEMENT AS OF	OMB Approval No. 3245-0063 Expiration Date 10/31/2017
Name of the Licensee:		License No:

1	2	3	4	5	6	
					Percent Owned or Controlled of Total Class	
Name and Address	Officer / Director/ Manager -- give exact titles	Title of class Owned or Controlled	Shares legally owned, beneficially owned, or controlled?	Number of shares	Beginning of Period	End of Period
/					%	%

OPERATING PLAN UPDATE	OMB Approval No. 3245-0063 Expiration Date 10/31/2017
Name of the Licensee:	License No:

INSTRUCTIONS

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

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

Content of the Report

1. For the fiscal year ended, the Licensee should discuss the following:
a. Major positive and negative events which affected overall performance during the year, including exits / distributions / write- offs of investments; highlight any significant differences between last year's plan and actual performance.
b. Any significant changes in the operations of the Licensee, such as changes in organizational structure, scope of operations, level or phase of investment activity, or types of investments being made.
c. Any management changes.
d. Any lawsuits or other events giving rise to contingent liabilities.

2. For the current fiscal year, the Licensee should discuss the following:
a. Levels of new and follow-on investment anticipated
b. Anticipated exits/distributions/write-offs from investments
c. Any material changes expected in investment strategy or portfolio composition
d. Any material changes expected in overhead expenditures
e. Any changes expected in management
f. Any other anticipated events which may have a significant effect on Licensee's performance.

3. If an SBIC is in Liquidation, wind-up or has been otherwise requested to provide a wind-up plan, the SBIC shall provide a wind-up plan as part of the Operating Plan Update. Per 13 CFR 107.590, SBICs in Operations must submit wind-up plans for SBA approval. After SBICs receive approval, they should provide updated windup plans on an annual basis as part of this Operating Plan Update. (See attached supplement.)

SCHEDULE 8

Unaudited Portfolio Company Information
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

General Portfolio Company Information

Business Description: NAICS:

Soybean farming, field and seed production

1st Date Invested: Overline?

Current Stage:

Exchange: Stock Symbol:

If original investment company's name changed, was acquired/merged, company name of original investment:

Address:

City/State:

Zip Code: LMI:

Other Comments:

Portfolio Company Financial Information

Rounded to nearest $

Fiscal Year End:

	Period 1	Period 2	Period 3
As Of Date			
Basis Period			
Revenues	$0	$0	$0
Gross Profit	$0	$0	$0
EBITDA	$0	$0	$0
Interest Charges	$0	$0	$0
Net Income	$0	$0	$0
Cashflow from Ops.	$0	$0	$0
Burn Rate	$0	$0	$0
Cash Balance	$0	$0	$0
Current Assets	$0	$0	$0
Fixed Assets	$0	$0	$0
Total Assets	$0	$0	$0
Current Liabilities	$0	$0	$0
Debt	$0	$0	$0
Total Liabilities	$0	$0	$0
EOY Equity Value (Market)	$0	$0	$0
EOY Enterprise Value	$0	$0	$0

Full-time employees : -

Federal Taxes Paid : $0 State Taxes Paid : $0

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 as follows:

1. The audited Annual Financial Report for the fiscal year ended _____ submitted by _____ (Licensee) to the Small Business Administration on SBA Form 468 is true and correct in all respects. The statements and schedules listed below have been omitted from the submission.

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 theFinancial 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 fiscal year 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: