FORM ADV
UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION AND REPORT BY EXEMPT REPORTING ADVISERS

Primary Business Name: SAFANAD INC. CRD Number: 170969
Other-Than-Annual Amendment - All Sections Rev. 03/2020
6/11/2021 5:12:49 PM

WARNING: Complete this form truthfully. False statements or omissions may result in denial of your application, revocation of your registration, or criminal prosecution. You must keep this form updated by filing periodic amendments. See Form ADV General Instruction 4.

Item 1 Identifying Information
Responses to this Item tell us who you are, where you are doing business, and how we can contact you. If you are filing an umbrella registration, the information in Item 1 should be provided for the filing adviser only. General Instruction 5 provides information to assist you with filing an umbrella registration.

A. Your full legal name (if you are a sole proprietor, your last, first, and middle names):
   SAFANAD INC.

B. (1) Name under which you primarily conduct your advisory business, if different from Item 1.A.
   SAFANAD INC.
   List on Section 1.B. of Schedule D any additional names under which you conduct your advisory business.

(2) If you are using this Form ADV to register more than one investment adviser under an umbrella registration, check this box.
   If you check this box, complete a Schedule R for each relying adviser.

C. If this filing is reporting a change in your legal name (Item 1.A.) or primary business name (Item 1.B.(1)), enter the new name and specify whether the name change is of your legal name or your primary business name:

D. (1) If you are registered with the SEC as an investment adviser, your SEC file number: 801-80203
(2) If you report to the SEC as an exempt reporting adviser, your SEC file number:
(3) If you have one or more Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:
   No Information Filed

E. (1) If you have a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system, your CRD number: 170969
   If your firm does not have a CRD number, skip this Item 1.E. Do not provide the CRD number of one of your officers, employees, or affiliates.

(2) If you have additional CRD Numbers, your additional CRD numbers:
   No Information Filed

F. Principal Office and Place of Business
(1) Address (do not use a P.O. Box):
   Number and Street 1: 505 5TH AVENUE
   Number and Street 2: 24TH FLOOR
   City: NEW YORK
   State: New York
   Country: United States
   ZIP+4/Postal Code: 10017-4902
   If this address is a private residence, check this box:

   List on Section 1.F. of Schedule D any office, other than your principal office and place of business, at which you conduct investment advisory business. If you are applying for registration, or are registered, with one or more state securities authorities, you must list all of your offices in the state or states to which you are applying for registration or with whom you are registered. If you are applying for SEC registration, if you are registered only with the SEC, or if you are reporting to the SEC as an exempt reporting adviser, list the largest twenty-five offices in terms of numbers of employees as of the end of your most recently completed fiscal year.

(2) Days of week that you normally conduct business at your principal office and place of business:
   ☐ Monday - Friday  ☐ Other:
   Normal business hours at this location:
   9:00 AM-6:00 PM
(3) Telephone number at this location:
   1-212-468-5600
(4) Facsimile number at this location, if any:
   1-212-468-5649
(5) What is the total number of offices, other than your principal office and place of business, at which you conduct investment advisory business as of the end of your most recently completed fiscal year?
   0
G. Mailing address, if different from your principal office and place of business:

Number and Street 1: ___________________________ Number and Street 2: ___________________________
City: ___________________________ State: __________ Country: ___________________________ ZIP+4/Postal Code: __________

If this address is a private residence, check this box: □

H. If you are a sole proprietor, state your full residence address, if different from your principal office and place of business in Item 1.F.:

Number and Street 1: ___________________________ Number and Street 2: ___________________________
City: ___________________________ State: __________ Country: ___________________________ ZIP+4/Postal Code: __________

I. Do you have one or more websites or accounts on publicly available social media platforms (including, but not limited to, Twitter, Facebook and LinkedIn)?

☐ Yes ☐ No

If "yes," list all firm website addresses and the address for each of the firm's accounts on publicly available social media platforms on Section 1.I. of Schedule D. If a website address serves as a portal through which to access other information you have published on the web, you may list the portal without listing addresses for all of the other information. You may need to list more than one portal address. Do not provide the addresses of websites or accounts on publicly available social media platforms where you do not control the content. Do not provide the individual electronic mail (e-mail) addresses of employees or the addresses of employee accounts on publicly available social media platforms.

J. Chief Compliance Officer

(1) Provide the name and contact information of your Chief Compliance Officer. If you are an exempt reporting adviser, you must provide the contact information for your Chief Compliance Officer, if you have one. If not, you must complete Item 1.K. below.

Name: ___________________________
Telephone number: ___________________________
Facsimile number, if any: ___________________________
Number and Street 1: ___________________________
City: ___________________________ State: __________ Country: ___________________________ ZIP+4/Postal Code: __________
Electronic mail (e-mail) address, if Chief Compliance Officer has one:

(2) If your Chief Compliance Officer is compensated or employed by any person other than you, a related person or an investment company registered under the Investment Company Act of 1940 that you advise for providing chief compliance officer services to you, provide the person's name and IRS Employer Identification Number (if any):

Name:
IRS Employer Identification Number:

K. Additional Regulatory Contact Person: If a person other than the Chief Compliance Officer is authorized to receive information and respond to questions about this Form ADV, you may provide that information here.

Name: ___________________________
Titles: ___________________________
Telephone number: ___________________________
Facsimile number, if any: ___________________________
Number and Street 1: ___________________________
City: ___________________________ State: __________ Country: ___________________________ ZIP+4/Postal Code: __________

Electronic mail (e-mail) address, if contact person has one:

L. Do you maintain some or all of the books and records you are required to keep under Section 204 of the Advisers Act, or similar state law, somewhere other than your principal office and place of business?

☐ Yes ☐ No

If "yes," complete Section 1.L. of Schedule D.

M. Are you registered with a foreign financial regulatory authority?

☐ Yes ☐ No

Answer "no" if you are not registered with a foreign financial regulatory authority, even if you have an affiliate that is registered with a foreign financial regulatory authority. If "yes," complete Section 1.M. of Schedule D.

N. Are you a public reporting company under Sections 12 or 15(d) of the Securities Exchange Act of 1934?

☐ Yes ☐ No

O. Did you have $1 billion or more in assets on the last day of your most recent fiscal year?
If yes, what is the approximate amount of your assets:

☐ $1 billion to less than $10 billion
☐ $10 billion to less than $50 billion
☐ $50 billion or more
For purposes of Item 1.O. only, "assets" refers to your total assets, rather than the assets you manage on behalf of clients. Determine your total assets using the total assets shown on the balance sheet for your most recent fiscal year end.

P. Provide your Legal Entity Identifier if you have one:

A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.

SECTION 1.B. Other Business Names

No Information Filed

SECTION 1.F. Other Offices

No Information Filed

SECTION 1.I. Website Addresses

List your website addresses, including addresses for accounts on publicly available social media platforms where you control the content (including, but not limited to, Twitter, Facebook and/or LinkedIn). You must complete a separate Schedule D Section 1.I. for each website or account on a publicly available social media platform.

Address of Website/Account on Publicly Available Social Media Platform: HTTPS://WWW.LINKEDIN.COM/COMPANY/SAFANAD-INC

Address of Website/Account on Publicly Available Social Media Platform: HTTP://SAFANAD.COM

SECTION 1.L. Location of Books and Records

Complete the following information for each location at which you keep your books and records, other than your principal office and place of business. You must complete a separate Schedule D, Section 1.L. for each location.

Name of entity where books and records are kept:
MAPLES FUND SERVICES (CAYMAN) LIMITED

Number and Street 1: PO BOX 309
Number and Street 2: UGLAND HOUSE
City: GRAND CAYMAN, KY1-1104
State: Country: Cayman Islands
ZIP+4/Postal Code:

If this address is a private residence, check this box: ☐

Telephone Number: 1-345-945-7099

Facsimile number, if any:

This is (check one):
☐ one of your branch offices or affiliates.
☐ a third-party unaffiliated recordkeeper.
☐ other.

Briefly describe the books and records kept at this location.
MAPLES FUND SERVICES (CAYMAN) LIMITED IS THE FUND ADMINISTRATOR FOR APPROXIMATELY 82 MASTER AND FEEDER FUND CLIENTS OF SAFANAD INC. AND MAINTAINS THE OFFICIAL BOOKS OF RECORDS FOR THESE CLIENTS.

Name of entity where books and records are kept:
MAPLESFS LIMITED

Number and Street 1: PO BOX 1093
Number and Street 2: QUEENSgate HOUSE
City: GRAND CAYMAN, KY1-1104
State: Country: Cayman Islands
ZIP+4/Postal Code:

Telephone Number:

Facsimile number, if any:

This is (check one):
☐ one of your branch offices or affiliates.
☐ a third-party unaffiliated recordkeeper.
☐ other.

Briefly describe the books and records kept at this location.
FORM ADV
UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION AND REPORT BY EXEMPT REPORTING ADVISERS

Primary Business Name: FORMATION CAPITAL, LLC

Responses to this Item tell us who you are, where you are doing business, and how we can contact you. If you are filing an umbrella registration under Section 204 of the Advisers Act, or similar state law, somewhere other than the principal office and place of business:

Section 1.L. Location of Books and Records

(1) Name under which you primarily conduct your advisory business, if different from your legal name:

FORMATION CAPITAL, LLC

Section 1.B. of Schedule D provide the name and contact information of your Chief Compliance Officer. If

(1) Provide the name and contact information of your Chief Compliance Officer. If

Yes

Yes

No

No

This is (check one):

☐ one of your branch offices or affiliates.

☐ a third-party unaffiliated recordkeeper.

☐ other.

Briefly describe the books and records kept at this location.

MAPLESF'S LIMITED IS THE SAFEKEEPING AGENT FOR THE CLIENTS OF SAFANAD INC. AND MAINTAINS THE CASH AND INVESTMENT SAFEKEEPING RECORDS FOR SAFANAD'S CLIENTS.

Name of entity where books and records are kept:

MAPLES FUND SERVICES (MIDDLE EAST) LIMITED

Number and Street 1:

6TH FLOOR, OFFICE 616, LIBERTY HOUSE

City:

DUBAI

If this address is a private residence, check this box: ☐

Telephone Number:

1-345-945-7099

Facsimile number, if any:

1-345-945-7100

This is (check one):

☐ one of your branch offices or affiliates.

☐ a third-party unaffiliated recordkeeper.

☐ other.

Briefly describe the books and records kept at this location.

MAPLES FUND SERVICES (MIDDLE EAST) LIMITED PROVIDES SUPPORT SERVICES TO THE FUND ADMINISTRATOR FOR APPROXIMATELY 82 MASTER AND FEEDER FUND CLIENTS OF SAFANAD INC. AND AS A RESULT MAINTAINS CERTAIN RECORDS AND INFORMATION WITH RESPECT TO THESE FUNDS.

Name of entity where books and records are kept:

FORMATION CAPITAL, LLC

Number and Street 1:

3500 LENOX ROAD NE

City:

ATLANTA

If this address is a private residence, check this box: ☐

Telephone Number:

770-754-9660

Facsimile number, if any:

770-754-3085

This is (check one):

☐ one of your branch offices or affiliates.

☐ a third-party unaffiliated recordkeeper.

☐ other.

Briefly describe the books and records kept at this location.

CERTAIN CLIENT FINANCIAL RECORDS NECESSARY FOR AUDIT SUPPORT OF SAFANAD INC. CLIENTS.
Name of entity where books and records are kept:
SAFANAD (DUBAI) LIMITED

Number and Street 1: LEVEL 4, UNIT 402A, THE GATE (EAST)
Number and Street 2: PO BOX 506704, DIFC
City: DUBAI
State: United Arab Emirates
Country: United Arab Emirates
ZIP+4/Postal Code: 30326

If this address is a private residence, check this box: ☐

Telephone Number: 971 4 312 9700
Facsimile number, if any: 0097143129777

This is (check one):
☐ one of your branch offices or affiliates.
☐ a third-party unaffiliated recordkeeper.
☐ other.

Briefly describe the books and records kept at this location.
CERTAIN FINANCIAL RECORDS NECESSARY FOR REVIEW AND SUPPORT BY THE ADMINISTRATORS OF CERTAIN SAFANAD INC. CLIENTS.

SECTION 1.M. Registration with Foreign Financial Regulatory Authorities

No Information Filed

Item 2 SEC Registration/Reporting

Responses to this Item help us (and you) determine whether you are eligible to register with the SEC. Complete this Item 2.A. only if you are applying for SEC registration or submitting an annual updating amendment to your SEC registration. If you are filing an umbrella registration, the information in Item 2 should be provided for the filing adviser only.

A. To register (or remain registered) with the SEC, you must check at least one of the Items 2.A.(1) through 2.A.(12), below. If you are submitting an annual updating amendment to your SEC registration and you are no longer eligible to register with the SEC, check Item 2.A.(13). Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the adviser):

☐ (1) are a large advisory firm that either:

(a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or
(b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:

(a) not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
(b) not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

☐ (3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☐ (5) are an investment adviser (or subadviser) to an investment company registered under the Investment Company Act of 1940;

☐ (6) are an investment adviser to a company which has elected to be a business development company pursuant to section 54 of the Investment Company Act of 1940 and has not withdrawn the election, and you have at least $25 million of regulatory assets under management;

☐ (7) are a pension consultant with respect to assets of plans having an aggregate value of at least $200,000,000 that qualifies for the exemption in rule 203A-2(a);

☐ (8) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

If you check this box, complete Section 2.A.(8) of Schedule D.

☐ (9) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days;

If you check this box, complete Section 2.A.(9) of Schedule D.

☐ (10) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d);
If you check this box, complete Section 2.A.(10) of Schedule D.

☐ (1) are an Internet adviser relying on rule 203A-2(e);

☐ (2) have received an SEC order exempting you from the prohibition against registration with the SEC;

If you check this box, complete Section 2.A.(12) of Schedule D.

☐ (3) are no longer eligible to remain registered with the SEC.

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State Securities Authority Notice Filings and State Reporting by Exempt Reporting Advisers

C. Under state laws, SEC-registered advisers may be required to provide to state securities authorities a copy of the Form ADV and any amendments they file with the SEC. These are called notice filings. In addition, exempt reporting advisers may be required to provide state securities authorities with a copy of reports and any amendments they file with the SEC. If this is an initial application or report, check the box(es) next to the state(s) that you would like to receive notice of this and all subsequent filings or reports you submit to the SEC. If this is an amendment to direct your notice filings or reports to additional state(s), check the box(es) next to the state(s) that you would like to receive notice of this and all subsequent filings or reports you submit to the SEC. If this is an amendment to your registration to stop your notice filings or reports from going to state(s) that currently receive them, uncheck the box(es) next to those state(s).

Jurisdictions

☐ AL ☐ AK ☐ AZ ☐ AR ☐ CA ☐ CO ☐ CT ☐ DE ☐ DC ☐ FL ☐ GA ☐ GU ☐ HI ☐ ID ☐ IL ☐ IN ☐ IA ☐ KS ☐ KY ☐ LA ☐ ME ☐ MD ☐ MA ☐ MI ☐ MN ☐ MS ☐ MO ☐ MT ☐ NE ☐ NV ☐ NH ☐ NJ ☐ NM ☐ NY ☐ NC ☐ ND ☐ OH ☐ OK ☐ OR ☐ PA ☐ PR ☐ RI ☐ SC ☐ SD ☐ NV ☐ HI ☐ GU ☐ MA ☐ WA ☐ WI ☐ WY

If you are amending your registration to stop your notice filings or reports from going to a state that currently receives them and you do not want to pay that state's notice filing or report filing fee for the coming year, your amendment must be filed before the end of the year (December 31).

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SECTION 2.A.(8) Related Adviser

If you are relying on the exemption in rule 203A-2(b) from the prohibition on registration because you control, are controlled by, or are under common control with an investment adviser that is registered with the SEC and your principal office and place of business is the same as that of the registered adviser, provide the following information:

Name of Registered Investment Adviser

CRO Number of Registered Investment Adviser

SEC Number of Registered Investment Adviser

---

SECTION 2.A.(9) Investment Adviser Expecting to be Eligible for Commission Registration within 120 Days

If you are relying on rule 203A-2(c), the exemption from the prohibition on registration available to an adviser that expects to be eligible for SEC registration within 120 days, you are required to make certain representations about your eligibility for SEC registration. By checking the appropriate boxes, you will be deemed to have made the required representations. You must make both of these representations:

☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

☐ I undertake to withdraw from SEC registration if, on the 120th day after my registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

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SECTION 2.A.(10) Multi-State Adviser

If you are relying on rule 203A-2(d), the multi-state adviser exemption from the prohibition on registration, you are required to make certain representations about your eligibility for SEC registration. By checking the appropriate boxes, you will be deemed to have made the required representations.

If you are applying for registration as an investment adviser with the SEC, you must make both of these representations:
I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states. I undertake to withdraw from SEC registration if I file an amendment to this registration indicating that I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities in those states.

If you are submitting your annual updating amendment, you must make this representation:

☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

SECTION 2.A.(12) SEC Exemptive Order

If you are relying on an SEC order exempting you from the prohibition on registration, provide the following information:

Application Number:
803-

Date of order:

Item 3 Form of Organization

If you are filing an umbrella registration, the information in Item 3 should be provided for the filing adviser only.

A. How are you organized?
   ☐ Corporation
   ☐ Sole Proprietorship
   ☐ Limited Liability Partnership (LLP)
   ☐ Partnership
   ☐ Limited Liability Company (LLC)
   ☐ Limited Partnership (LP)
   ☐ Other (specify):

   If you are changing your response to this Item, see Part 1A Instruction 4.

B. In what month does your fiscal year end each year?
   DECEMBER

C. Under the laws of what state or country are you organized?
   State  Country
   Delaware  United States

   If you are a partnership, provide the name of the state or country under whose laws your partnership was formed. If you are a sole proprietor, provide the name of the state or country where you reside.

   If you are changing your response to this Item, see Part 1A Instruction 4.

Item 4 Successions

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☑</td>
</tr>
</tbody>
</table>

A. Are you, at the time of this filing, succeeding to the business of a registered investment adviser, including, for example, a change of your structure or legal status (e.g., form of organization or state of incorporation)?

If "yes", complete Item 4.B. and Section 4 of Schedule D.

B. Date of Succession: (MM/DD/YYYY)

   If you have already reported this succession on a previous Form ADV filing, do not report the succession again. Instead, check "No." See Part 1A Instruction 4.

SECTION 4 Successions

No Information Filed
Employees

If you are organized as a sole proprietorship, include yourself as an employee in your responses to Item 5.A. and Items 5.B.(1), (2), (3), (4), and (5). If an employee performs more than one function, you should count that employee in each of your responses to Items 5.B.(1), (2), (3), (4), and (5).

A. Approximately how many employees do you have? Include full- and part-time employees but do not include any clerical workers.

18

B. (1) Approximately how many of the employees reported in 5.A. perform investment advisory functions (including research)?

13

(2) Approximately how many of the employees reported in 5.A. are registered representatives of a broker-dealer?

0

(3) Approximately how many of the employees reported in 5.A. are registered with one or more state securities authorities as investment adviser representatives?

0

(4) Approximately how many of the employees reported in 5.A. are registered with one or more state securities authorities as investment adviser representatives for an investment adviser other than you?

0

(5) Approximately how many of the employees reported in 5.A. are licensed agents of an insurance company or agency?

0

(6) Approximately how many firms or other persons solicit advisory clients on your behalf?

0

In your response to Item 5.B.(6), do not count any of your employees and count a firm only once – do not count each of the firm’s employees that solicit on your behalf.

Clients

In your responses to Items 5.C. and 5.D. do not include as "clients" the investors in a private fund you advise, unless you have a separate advisory relationship with those investors.

C. (1) To approximately how many clients for whom you do not have regulatory assets under management did you provide investment advisory services during your most recently completed fiscal year?

0

(2) Approximately what percentage of your clients are non-United States persons?

49%

D. For purposes of this Item 5.D., the category "individuals" includes trusts, estates, and 401(k) plans and IRAs of individuals and their family members, but does not include businesses organized as sole proprietorships.

The category "business development companies" consists of companies that have made an election pursuant to section 54 of the Investment Company Act of 1940. Unless you provide advisory services pursuant to an investment advisory contract to an investment company registered under the Investment Company Act of 1940, do not answer (d)(1) or (d)(3) below.

Indicate the approximate number of your clients and amount of your total regulatory assets under management (reported in Item 5.F. below) attributable to each of the following type of client. If you have fewer than 5 clients in a particular category (other than (d), (e), and (f)) you may check Item 5.D.(2) rather than respond to Item 5.D.(1).

The aggregate amount of regulatory assets under management reported in Item 5.D.(3) should equal the total amount of regulatory assets under management reported in Item 5.F.(2)(c) below.

If a client fits into more than one category, select one category that most accurately represents the client to avoid double counting clients and assets. If you advise a registered investment company, business development company, or pooled investment vehicle, report those assets in categories (d), (e), and (f) as applicable.

<table>
<thead>
<tr>
<th>Type of Client</th>
<th>(1) Number of Client(s)</th>
<th>(2) Fewer than 5 Clients</th>
<th>(3) Amount of Regulatory Assets under Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Individuals (other than high net worth individuals)</td>
<td>[ ]</td>
<td>[ ]</td>
<td>$</td>
</tr>
<tr>
<td>(b) High net worth individuals</td>
<td>[ ]</td>
<td>[ ]</td>
<td>$</td>
</tr>
<tr>
<td>(c) Banking or thrift institutions</td>
<td>[ ]</td>
<td>[ ]</td>
<td>$</td>
</tr>
<tr>
<td>(d) Investment companies</td>
<td>[ ]</td>
<td>[ ]</td>
<td>$</td>
</tr>
<tr>
<td>(e) Business development companies</td>
<td>[ ]</td>
<td>[ ]</td>
<td>$</td>
</tr>
<tr>
<td>(f) Pooled investment vehicles (other than investment companies and business development companies)</td>
<td>88</td>
<td>[ ]</td>
<td>$ 1,272,528,562</td>
</tr>
<tr>
<td>(g) Pension and profit sharing plans (but not the plan participants or government pension plans)</td>
<td>[ ]</td>
<td>[ ]</td>
<td>$</td>
</tr>
</tbody>
</table>
Item 5 Information About Your Advisory Business - Regulatory Assets Under Management

F. (1) Do you provide continuous and regular supervisory or management services to securities portfolios? 

Yes ☐ No ☑

(2) If yes, what is the amount of your regulatory assets under management and total number of accounts?

<table>
<thead>
<tr>
<th></th>
<th>U.S. Dollar Amount</th>
<th>Total Number of Accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discretionary:</td>
<td>(a) $1,272,528,562</td>
<td>(d) 88</td>
</tr>
<tr>
<td>Non-Discretionary:</td>
<td>(b) $0</td>
<td>(e) 0</td>
</tr>
<tr>
<td>Total:</td>
<td>(c) $1,272,528,562</td>
<td>(f) 88</td>
</tr>
</tbody>
</table>

Part 1A Instruction 5.b. explains how to calculate your regulatory assets under management. You must follow these instructions carefully when completing this Item.

(3) What is the approximate amount of your total regulatory assets under management (reported in Item 5.F.(2)(c) above) attributable to clients who are non-United States persons?

$965,389,738

Item 5 Information About Your Advisory Business - Advisory Activities

G. What type(s) of advisory services do you provide? Check all that apply.

- ☐ (1) Financial planning services
- ☐ (2) Portfolio management for individuals and/or small businesses
- ☐ (3) Portfolio management for investment companies (as well as "business development companies" that have made an election pursuant to section 54 of the Investment Company Act of 1940)
- ☐ (4) Portfolio management for pooled investment vehicles (other than investment companies)
- ☐ (5) Portfolio management for businesses (other than small businesses) or institutional clients (other than registered investment companies and other pooled investment vehicles)
- ☐ (6) Pension consulting services
- ☐ (7) Selection of other advisers (including private fund managers)
- ☐ (8) Publication of periodicals or newsletters
- ☐ (9) Security ratings or pricing services
- ☐ (10) Market timing services
- ☐ (11) Educational seminars/workshops
- ☐ (12) Other (specify):

Do not check Item 5.G.(3) unless you provide advisory services pursuant to an investment advisory contract to an investment company registered under the Investment Company Act of 1940, including as a subadviser. If you check Item 5.G.(3), report the 811 or 814 number of the investment company or investment companies to which you provide advice in Section 5.G.(3) of Schedule D.

H. If you provide financial planning services, to how many clients did you provide these services during your last fiscal year?

- ☐ 0
- ☐ 1 - 10
- ☐ 11 - 25
- ☐ 26 - 50
- ☐ 51 - 100
- ☐ 101 - 250
- ☐ 251 - 500
- ☐ 501 - 1000
- ☐ 1001 - 2500
- ☐ 2501 - 5000
- ☐ 5001 - 10000
- ☐ More than 10000
In your responses to this Item 5.H., do not include as “clients” the investors in a private fund you advise, unless you have a separate advisory relationship with those investors.

I. (1) Do you participate in a wrap fee program?  
(2) If you participate in a wrap fee program, what is the amount of your regulatory assets under management attributable to acting as: 
   (a) sponsor to a wrap fee program  
   $  
   (b) portfolio manager for a wrap fee program?  
   $  
   (c) sponsor to and portfolio manager for the same wrap fee program?  
   $  

If you report an amount in Item 5.I.(2)(c), do not report that amount in Item 5.I.(2)(a) or Item 5.I.(2)(b).

If you are a portfolio manager for a wrap fee program, list the names of the programs, their sponsors and related information in Section 5.I.(2) of Schedule D.

If your involvement in a wrap fee program is limited to recommending wrap fee programs to your clients, or you advise a mutual fund that is offered through a wrap fee program, do not check Item 5.I.(1) or enter any amounts in response to Item 5.I.(2).

J. (1) In response to Item 4.B. of Part 2A of Form ADV, do you indicate that you provide investment advice only with respect to limited types of investments?  
(2) Do you report client assets in Item 4.E. of Part 2A that are computed using a different method than the method used to compute your regulatory assets under management?

K. Separately Managed Account Clients

(1) Do you have regulatory assets under management attributable to clients other than those listed in Item 5.D.(3)(d)-(f) (separately managed account clients)?  
   If yes, complete Section 5.K.(1) of Schedule D.

(2) Do you engage in borrowing transactions on behalf of any of the separately managed account clients that you advise?  
   If yes, complete Section 5.K.(2) of Schedule D.

(3) Do you engage in derivative transactions on behalf of any of the separately managed account clients that you advise?  
   If yes, complete Section 5.K.(2) of Schedule D.

(4) After subtracting the amounts in Item 5.D.(3)(d)-(f) above from your total regulatory assets under management, does any custodian hold ten percent or more of this remaining amount of regulatory assets under management?  
   If yes, complete Section 5.K.(3) of Schedule D for each custodian.

SECTION 5.G.(3) Advisers to Registered Investment Companies and Business Development Companies

No Information Filed

SECTION 5.I.(2) Wrap Fee Programs

No Information Filed

SECTION 5.K.(1) Separately Managed Accounts

After subtracting the amounts reported in Item 5.D.(3)(d)-(f) from your total regulatory assets under management, indicate the approximate percentage of this remaining amount attributable to each of the following categories of assets. If the remaining amount is at least $10 billion in regulatory assets under management, complete Question (a). If the remaining amount is less than $10 billion in regulatory assets under management, complete Question (b).

Any regulatory assets under management reported in Item 5.D.(3)(d), (e), and (f) should not be reported below.

If you are a subadviser to a separately managed account, you should only provide information with respect to the portion of the account that you subadvise.

End of year refers to the date used to calculate your regulatory assets under management for purposes of your annual updating amendment. Mid-year is the date six months before
Investments in derivatives, registered investment companies, business development companies, and pooled investment vehicles should be reported in those categories. Do not report those investments based on related or underlying portfolio assets. Cash equivalents include bank deposits, certificates of deposit, bankers' acceptances and similar bank instruments.

Some assets could be classified into more than one category or require discretion about which category applies. You may use your own internal methodologies and the conventions of your service providers in determining how to categorize assets, so long as the methodologies or conventions are consistently applied and consistent with information you report internally and to current and prospective clients. However, you should not double count assets, and your responses must be consistent with any instructions or other guidance relating to this Section.

(a) Asset Type

<table>
<thead>
<tr>
<th>Asset Type</th>
<th>Mid-year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Exchange-Traded Equity Securities</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(ii) Non Exchange-Traded Equity Securities</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(iii) U.S. Government/Agency Bonds</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(iv) U.S. State and Local Bonds</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(v) Sovereign Bonds</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(vi) Investment Grade Corporate Bonds</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(vii) Non-Investment Grade Corporate Bonds</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(viii) Derivatives</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(ix) Securities Issued by Registered Investment Companies or Business Development Companies</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(x) Securities Issued by Pooled Investment Vehicles (other than Registered Investment Companies or Business Development Companies)</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(xi) Cash and Cash Equivalents</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>(xii) Other</td>
<td>%</td>
<td>%</td>
</tr>
</tbody>
</table>

Generally describe any assets included in "Other"

(b) Asset Type

<table>
<thead>
<tr>
<th>Asset Type</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Exchange-Traded Equity Securities</td>
<td>%</td>
</tr>
<tr>
<td>(ii) Non Exchange-Traded Equity Securities</td>
<td>%</td>
</tr>
<tr>
<td>(iii) U.S. Government/Agency Bonds</td>
<td>%</td>
</tr>
<tr>
<td>(iv) U.S. State and Local Bonds</td>
<td>%</td>
</tr>
<tr>
<td>(v) Sovereign Bonds</td>
<td>%</td>
</tr>
<tr>
<td>(vi) Investment Grade Corporate Bonds</td>
<td>%</td>
</tr>
<tr>
<td>(vii) Non-Investment Grade Corporate Bonds</td>
<td>%</td>
</tr>
<tr>
<td>(viii) Derivatives</td>
<td>%</td>
</tr>
<tr>
<td>(ix) Securities Issued by Registered Investment Companies or Business Development Companies</td>
<td>%</td>
</tr>
<tr>
<td>(x) Securities Issued by Pooled Investment Vehicles (other than Registered Investment Companies or Business Development Companies)</td>
<td>%</td>
</tr>
<tr>
<td>(xi) Cash and Cash Equivalents</td>
<td>%</td>
</tr>
<tr>
<td>(xii) Other</td>
<td>%</td>
</tr>
</tbody>
</table>

Generally describe any assets included in "Other"

SECTION 5.K.(2) Separately Managed Accounts - Use of Borrowings and Derivatives

No information is required to be reported in this Section 5.K.(2) per the instructions of this Section 5.K.(2)

If your regulatory assets under management attributable to separately managed accounts are at least $10 billion, you should complete Question (a). If your regulatory assets under management attributable to separately managed accounts are at least $500 million but less than $10 billion, you should complete Question (b).

(a) In the table below, provide the following information regarding the separately managed accounts you advise. If you are a subadviser to a separately managed account, you should only provide information with respect to the portion of the account that you subadviser. End of year refers to the date used to calculate your regulatory assets under management for purposes of your annual updating amendment. Mid-year is the date six months before the end of year date.

In column 1, indicate the regulatory assets under management attributable to separately managed accounts associated with each level of gross notional exposure. For purposes of this table, the gross notional exposure of an account is the percentage obtained by dividing (i) the sum of (a) the dollar amount of any borrowings and (b) the gross notional value of all derivatives, by (ii) the regulatory assets under management of the account.

In column 2, provide the dollar amount of borrowings for the accounts included in column 1.

In column 3, provide aggregate gross notional value of derivatives divided by the aggregate regulatory assets under management of the accounts included in column 1 with

the end of year date. Each column should add up to 100% and numbers should be rounded to the nearest percent.
You may, but are not required to, complete the table with respect to any separately managed account with regulatory assets under management of less than $10,000,000.

Any regulatory assets under management reported in Item 5.D.(3)(d), (e), and (f) should not be reported below.

(i) Mid-Year

<table>
<thead>
<tr>
<th>Gross Notional Exposure</th>
<th>(1) Regulatory Assets Under Management</th>
<th>(2) Borrowings</th>
<th>(3) Derivative Exposures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>(a) Interest Rate Derivative</td>
</tr>
<tr>
<td>Less than 10%</td>
<td>$</td>
<td>$</td>
<td>%</td>
</tr>
<tr>
<td>10-149%</td>
<td>$</td>
<td>$</td>
<td>%</td>
</tr>
<tr>
<td>150% or more</td>
<td>$</td>
<td>$</td>
<td>%</td>
</tr>
</tbody>
</table>

Optional: Use the space below to provide a narrative description of the strategies and/or manner in which borrowings and derivatives are used in the management of the separately managed accounts that you advise.

(ii) End of Year

<table>
<thead>
<tr>
<th>Gross Notional Exposure</th>
<th>(1) Regulatory Assets Under Management</th>
<th>(2) Borrowings</th>
<th>(3) Derivative Exposures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>(a) Interest Rate Derivative</td>
</tr>
<tr>
<td>Less than 10%</td>
<td>$</td>
<td>$</td>
<td>%</td>
</tr>
<tr>
<td>10-149%</td>
<td>$</td>
<td>$</td>
<td>%</td>
</tr>
<tr>
<td>150% or more</td>
<td>$</td>
<td>$</td>
<td>%</td>
</tr>
</tbody>
</table>

Optional: Use the space below to provide a narrative description of the strategies and/or manner in which borrowings and derivatives are used in the management of the separately managed accounts that you advise.

(b) In the table below, provide the following information regarding the separately managed accounts you advise as of the date used to calculate your regulatory assets under management for purposes of your annual updating amendment. If you are a subadviser to a separately managed account, you should only provide information with respect to the portion of the account that you subadviser.

In column 1, indicate the regulatory assets under management attributable to separately managed accounts associated with each level of gross notional exposure. For purposes of this table, the gross notional exposure of an account is the percentage obtained by dividing (i) the sum of (a) the dollar amount of any borrowings and (b) the gross notional value of all derivatives, by (ii) the regulatory assets under management of the account.

In column 2, provide the dollar amount of borrowings for the accounts included in column 1.

You may, but are not required to, complete the table with respect to any separately managed accounts with regulatory assets under management of less than $10,000,000.

Any regulatory assets under management reported in Item 5.D.(3)(d), (e), and (f) should not be reported below.

<table>
<thead>
<tr>
<th>Gross Notional Exposure</th>
<th>(1) Regulatory Assets Under Management</th>
<th>(2) Borrowings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 10%</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>10-149%</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>150% or more</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

Optional: Use the space below to provide a narrative description of the strategies and/or manner in which borrowings and derivatives are used in the management of the separately managed accounts that you advise.

SECTION 5.K.(3) Custodians for Separately Managed Accounts

No Information Filed

Item 6 Other Business Activities

In this Item, we request information about your firm's other business activities.

A. You are actively engaged in business as a (check all that apply):

- CRD Number:
- or reports from going to state(s) that currently
- are
- %
- %
- (1) If you have a number ("%
- You are compensated for your investment advisory services by (check all that apply):
- in your responses to Item 5.A. and Items 5.B.(1), (2), (3), (4), and (5).
- 

Country:
- is the same as that of the registered adviser, provide the following information:

- U.S. Government/Agency Bonds
- Exchange-Traded Equity Securities
- Non-Investment Grade Corporate Bonds
- Other
- employees
- Publication of periodicals or newsletters
- Country
did you provide these services during your last fiscal year?

$-
- or
- (3) Derivative Exposures
- %
- %
- %
- %
- %
- %

In what month does your fiscal year end each year?

End of year refers to the date used to calculate your regulatory assets under management

If your regulatory assets under management attributable to separately managed accounts are at least $10 billion, you should complete Question (a).

For purposes of this Item 5.D., the category "individuals" includes trusts, estates, and 401(k) plans and IRAs of individuals and their family members, but does not include

a copy of the Form ADV and any amendments they file with the SEC. These

State:
- Did you provide any report to an
- if you advise?

Investments in derivatives, registered investment companies, business development companies, and pooled investment vehicles should be reported in those categories.

Optional: Use the space below to provide a narrative description of the strategies and/or manner in which borrowings and derivatives are used in the management of the separately managed accounts that you advise.
Form ADV
Uniform Application for Investment Adviser Registration and Report by Exempt Reporting Advisers

If you engage in other business using a name that is different from the names reported in Items 1.A. or 1.B.(1), complete Section 6.A. of Schedule D.

B. (1) Are you actively engaged in any other business not listed in Item 6.A. (other than giving investment advice)?
   (2) If yes, is this other business your primary business?
      If “yes,” describe this other business on Section 6.B.(2) of Schedule D, and if you engage in this business under a different name, provide that name.
      (3) Do you sell products or provide services other than investment advice to your advisory clients?
         If “yes,” describe this other business on Section 6.B.(3) of Schedule D, and if you engage in this business under a different name, provide that name.

SECTION 6.A. Names of Your Other Businesses

No Information Filed

SECTION 6.B.(2) Description of Primary Business

Describe your primary business (not your investment advisory business):

If you engage in that business under a different name, provide that name:

SECTION 6.B.(3) Description of Other Products and Services

Describe other products or services you sell to your clients. You may omit products and services that you listed in Section 6.B.(2) above. SAFANAD INC., WHEN PROVIDED FOR IN THE CLIENT'S OFFERING AND ORGANIZATIONAL DOCUMENTS, RECEIVES FEES IN CONNECTION WITH ASSET SERVICING AGREEMENTS AND IN CONNECTION WITH INVESTMENTS BY CLIENTS, INCLUDING ADMINISTRATION, DUE DILIGENCE AND SIMILAR SERVICES.

If you engage in that business under a different name, provide that name:

Item 7 Financial Industry Affiliations

In this Item, we request information about your financial industry affiliations and activities. This information identifies areas in which conflicts of interest may occur between you and your clients.

A. This part of Item 7 requires you to provide information about you and your related persons, including foreign affiliates. Your related persons are all of your advisory affiliates and any person that is under common control with you.

You have a related person that is a (check all that apply):
   (1) broker-dealer, municipal securities dealer, or government securities broker or dealer (registered or unregistered)
   (2) other investment adviser (including financial planners)
   (3) registered municipal advisor
   (4) registered security-based swap dealer
   (5) major security-based swap participant
   (6) commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
   (7) futures commission merchant
   (8) banking or thrift institution
   (9) trust company
   (10) accountant or accounting firm
   (11) lawyer or law firm
   (12) insurance company or agency
   (13) pension consultant
   (14) real estate broker or dealer
   (15) sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
Note that Item 7.A. should not be used to disclose that some of your employees perform investment advisory functions or are registered representatives of a broker-dealer. The number of your firm's employees who perform investment advisory functions should be disclosed under Item 5.B.(1). The number of your firm's employees who are registered representatives of a broker-dealer should be disclosed under Item 5.B.(2).

Note that if you are filing an umbrella registration, you should not check Item 7.A.(2) with respect to your relying advisers, and you do not have to complete Section 7.A. in Schedule D for your relying advisers. You should complete a Schedule R for each relying adviser.

For each related person, including foreign affiliates that may not be registered or required to be registered in the United States, complete Section 7.A. of Schedule D.

You do not need to complete Section 7.A. of Schedule D for any related person if: (1) you have no business dealings with the related person in connection with advisory services you provide to your clients; (2) you do not conduct shared operations with the related person; (3) you do not refer clients or business to the related person, and the related person does not refer prospective clients or business to you; (4) you do not share supervised persons or premises with the related person; and (5) you have no reason to believe that your relationship with the related person otherwise creates a conflict of interest with your clients.

You must complete Section 7.A. of Schedule D for each related person acting as qualified custodian in connection with advisory services you provide to your clients (other than any mutual fund transfer agent pursuant to rule 206(4)-2(b)(1)), regardless of whether you have determined the related person to be operationally independent under rule 206(4)-2 of the Advisers Act.

SECTION 7.A. Financial Industry Affiliations

Complete a separate Schedule D Section 7.A. for each related person listed in Item 7.A.

1. Legal Name of Related Person:
   SAFANAD INDUSTRY CAPITAL INTERNET INFRASTRUCTURE MANAGEMENT, LLC

2. Primary Business Name of Related Person:
   SAFANAD INDUSTRY CAPITAL INTERNET INFRASTRUCTURE MANAGEMENT, LLC

3. Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
   802 - 112371
   or Other

4. Related Person's
   (a) CRD Number (if any):
       291959
   (b) CIK Number(s) (if any):
       No Information Filed

5. Related Person is: (check all that apply)
   (a) ☐ broker-dealer, municipal securities dealer, or government securities broker or dealer
   (b) ☑ other investment adviser (including financial planners)
   (c) ☐ registered municipal advisor
   (d) ☐ registered security-based swap dealer
   (e) ☐ major security-based swap participant
   (f) ☐ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
   (g) ☐ futures commission merchant
   (h) ☐ banking or thrift institution
   (i) ☐ trust company
   (j) ☐ accountant or accounting firm
   (k) ☐ lawyer or law firm
   (l) ☐ insurance company or agency
   (m) ☐ pension consultant
   (n) ☐ real estate broker or dealer
   (o) ☐ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
   (p) ☐ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

Do you control or are you controlled by the related person?

Yes ☐ No ☑

Are you and the related person under common control?

☐ ☐

Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?

☐ ☐

If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients' funds or securities that are maintained at the related person?

☐ ☐

If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:
9. (a) If the related person is an investment adviser, is it exempt from registration?
(b) If the answer is yes, under what exemption?

EXEMPT REPORTING ADVISER

10. (a) Is the related person registered with a foreign financial regulatory authority?
(b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.

No Information Filed

11. Do you and the related person share any supervised persons?

No

12. Do you and the related person share the same physical location?

No
FORM ADV
UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION AND REPORT BY EXEMPT REPORTING ADVISERS

Primary Business Name of Related Person:
SAFANAD INDUSTRY CAPITAL INTERNET INFRASTRUCTURE GP, LLC

Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
- or Other

Related Person's CRD Number (if any):

Related Person's CIK Number(s) (if any):
No Information Filed

5. Related Person is: (check all that apply)
(a) ☐ broker-dealer, municipal securities dealer, or government securities broker or dealer
(b) ☐ other investment adviser (including financial planners)
(c) ☐ registered municipal advisor
(d) ☐ registered security-based swap dealer
(e) ☐ major security-based swap participant
(f) ☐ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
(g) ☐ futures commission merchant
(h) ☐ banking or thrift institution
(i) ☐ trust company
(j) ☐ accountant or accounting firm
(k) ☐ lawyer or law firm
(l) ☐ insurance company or agency
(m) ☐ pension consultant
(n) ☐ real estate broker or dealer
(o) ☐ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
(p) ☐ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

6. Do you control or are you controlled by the related person?

Yes ☐ No ☐

7. Are you and the related person under common control?

Yes ☐ No ☐

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?

Yes ☐ No ☐

(b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients' funds or securities that are maintained at the related person?

Yes ☐ No ☐

(c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:

Number and Street 1:
City: __________________ State: __________ Country: __________ ZIP+4/Postal Code: __________
If this address is a private residence, check this box: ☐

9. (a) If the related person is an investment adviser, is it exempt from registration?

Yes ☐ No ☐

(b) If the answer is yes, under what exemption?

10. (a) Is the related person registered with a foreign financial regulatory authority?

Yes ☐ No ☐

(b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.

No Information Filed

11. Do you and the related person share any supervised persons?

Yes ☐ No ☐

12. Do you and the related person share the same physical location?

Yes ☐ No ☐
12. Do you and the related person share the same physical location?

1. Legal Name of Related Person:
   SSHDIP I GP LLC

2. Primary Business Name of Related Person:
   SSHDIP I GP LLC

3. Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
   -
   or
   Other

4. Related Person's
   (a) CRD Number (if any):
   (b) CIK Number(s) (if any):

5. Related Person is: (check all that apply)
   (a) ☐ broker-dealer, municipal securities dealer, or government securities broker or dealer
   (b) ☐ other investment adviser (including financial planners)
   (c) ☐ registered municipal advisor
   (d) ☐ registered security-based swap dealer
   (e) ☐ major security-based swap participant
   (f) ☐ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
   (g) ☐ futures commission merchant
   (h) ☐ banking or thrift institution
   (i) ☐ trust company
   (j) ☐ accountant or accounting firm
   (k) ☐ lawyer or law firm
   (l) ☐ insurance company or agency
   (m) ☐ pension consultant
   (n) ☐ real estate broker or dealer
   (o) ☐ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
   (p) ☐ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

6. Do you control or are you controlled by the related person?

7. Are you and the related person under common control?

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?
   (b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients' funds or securities that are maintained at the related person?
   (c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:

5. Related Person is: (check all that apply)
   (a) ☐ broker-dealer, municipal securities dealer, or government securities broker or dealer
   (b) ☐ other investment adviser (including financial planners)
   (c) ☐ registered municipal advisor
   (d) ☐ registered security-based swap dealer
   (e) ☐ major security-based swap participant
   (f) ☐ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
   (g) ☐ futures commission merchant
   (h) ☐ banking or thrift institution
   (i) ☐ trust company
   (j) ☐ accountant or accounting firm
   (k) ☐ lawyer or law firm
   (l) ☐ insurance company or agency
   (m) ☐ pension consultant
   (n) ☐ real estate broker or dealer
   (o) ☐ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
   (p) ☐ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles
   No Information Filed

9. (a) If the related person is an investment adviser, is it exempt from registration?
   (b) If the answer is yes, under what exemption?

10. (a) Is the related person registered with a foreign financial regulatory authority?
    (b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.

11. Do you and the related person share any supervised persons?

12. Do you and the related person share the same physical location?
2. Primary Business Name of Related Person:
SSHIP I GP, LLC

3. Related Person’s SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
- or Other

4. Related Person’s
(a) CRD Number (if any):
(b) CIK Number(s) (if any):

No Information Filed

5. Related Person is: (check all that apply)
(a) ☐ broker-dealer, municipal securities dealer, or government securities broker or dealer
(b) ☐ other investment adviser (including financial planners)
(c) ☐ registered municipal advisor
(d) ☐ registered security-based swap dealer
(e) ☐ major security-based swap participant
(f) ☐ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
(g) ☐ futures commission merchant
(h) ☐ banking or thrift institution
(i) ☐ trust company
(j) ☐ accountant or accounting firm
(k) ☐ lawyer or law firm
(l) ☐ insurance company or agency
(m) ☐ pension consultant
(n) ☐ real estate broker or dealer
(o) ☐ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
(p) ☐ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

6. Do you control or are you controlled by the related person?

☐ Yes ☐ No

7. Are you and the related person under common control?

☐ Yes ☐ No

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?

☐ Yes ☐ No

(b) If you are registering or registered with the SEC and you have answered “yes,” to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients’ funds or securities that are maintained at the related person?

☐ Yes ☐ No

(c) If you have answered “yes” to question 8.(a) above, provide the location of the related person’s office responsible for custody of your clients’ assets:
Number and Street 1:
City: State:
If this address is a private residence, check this box: ☐

Number and Street 2:
Country:
ZIP+4/Postal Code:

☐ Yes ☐ No

9. (a) If the related person is an investment adviser, is it exempt from registration?

☐ Yes ☐ No

(b) If the answer is yes, under what exemption?

10. (a) Is the related person registered with a foreign financial regulatory authority?

☐ Yes ☐ No

(b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.
No Information Filed

11. Do you and the related person share any supervised persons?

☐ Yes ☐ No

12. Do you and the related person share the same physical location?

☐ Yes ☐ No

1. Legal Name of Related Person:
SSHIP II GP LIMITED

2. Primary Business Name of Related Person:
SSHIP II GP LIMITED

3. Related Person’s SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
4. Related Person's
(a) CRD Number (if any):
(b) CIK Number(s) (if any):

5. Related Person is: (check all that apply)
(a) □ broker-dealer, municipal securities dealer, or government securities broker or dealer
(b) □ other investment adviser (including financial planners)
(c) □ registered municipal advisor
(d) □ registered security-based swap dealer
(e) □ major security-based swap participant
(f) □ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
(g) □ futures commission merchant
(h) □ banking or thrift institution
(i) □ trust company
(j) □ accountant or accounting firm
(k) □ lawyer or law firm
(l) □ insurance company or agency
(m) □ pension consultant
(n) □ real estate broker or dealer
(o) □ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
(p) □ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

6. Do you control or are you controlled by the related person?

7. Are you and the related person under common control?

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?
(b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients’ funds or securities that are maintained at the related person?
(c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:

   Number and Street 1: ____________________________
   City: ____________________________ State: ____________
   Country: ____________________________ ZIP+4/Postal Code: ____________

   If this address is a private residence, check this box: □

9. (a) Is the related person an investment adviser, is it exempt from registration?
(b) If the answer is yes, under what exemption?

10. (a) Is the related person registered with a foreign financial regulatory authority?
(b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.

11. Do you and the related person share any supervised persons?

12. Do you and the related person share the same physical location?

---

1. Legal Name of Related Person:
SAFANAD GOLDFENYE GP LIMITED

2. Primary Business Name of Related Person:
SAFANAD GOLDFENYE GP LIMITED

3. Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
- 
or 
Other

4. Related Person's
(a) CRD Number (if any):
5. **Related Person** is: (check all that apply)
(a) ☐ broker-dealer, municipal securities dealer, or government securities broker or dealer
(b) ☐ other investment adviser (including financial planners)
(c) ☐ registered municipal advisor
(d) ☐ registered security-based swap dealer
(e) ☐ major security-based swap participant
(f) ☐ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
(g) ☐ futures commission merchant
(h) ☐ banking or thrift institution
(i) ☐ trust company
(j) ☐ accountant or accounting firm
(k) ☐ lawyer or law firm
(l) ☐ insurance company or agency
(m) ☐ pension consultant
(n) ☐ real estate broker or dealer
(o) ☐ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
(p) ☐ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

6. Do you control or are you controlled by the related person?

7. Are you and the related person under common control?

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?
(b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-(2)(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients' funds or securities that are maintained at the related person?
(c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:

<table>
<thead>
<tr>
<th>Number and Street 1:</th>
<th>Number and Street 2:</th>
<th>ZIP+4/Postal Code:</th>
</tr>
</thead>
<tbody>
<tr>
<td>City:</td>
<td>State:</td>
<td>Country:</td>
</tr>
</tbody>
</table>

If this address is a private residence, check this box: ☐

9. (a) If the related person is an investment adviser, is it exempt from registration?
(b) If the answer is yes, under what exemption?

10. (a) Is the related person registered with a foreign financial regulatory authority?
(b) If the answer is yes, list the name and country, in English, of each foreign financial regulatory authority with which the related person is registered.

11. Do you and the related person share any supervised persons?

12. Do you and the related person share the same physical location?

---

1. **Legal Name of Related Person:**
SAFANAD EDUCATION VENTURES GP LIMITED

2. **Primary Business Name of Related Person:**
SAFANAD EDUCATION VENTURES GP LIMITED

3. **Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)**
- 
  or
- Other

4. **Related Person's**
(a) **CRD Number (if any):**
(b) CIK Number(s) (if any):

5. **Related Person** is: (check all that apply)
(a) ☐ broker-dealer, municipal securities dealer, or government securities broker or dealer
(b) ☐ other investment adviser (including financial planners)
(c) ☐ registered municipal advisor
(d) ☐ registered security-based swap dealer
(e) ☐ major security-based swap participant
(f) ☐ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

6. Do you control or are you controlled by the related person?
Yes ☐ No ☐

7. Are you and the related person under common control?
Yes ☐ No ☐

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?
Yes ☐ No ☐
(b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients’ funds or securities that are maintained at the related person?
Yes ☐ No ☐
(c) If you have answered "yes" to question 8.(a) above, provide the location of the related person’s office responsible for custody of your clients’ assets:
Name and Street 1: ____________________________ Number and Street 2: ____________________________
City: ____________________________ State: ____________ Country: ____________ ZIP+4/Postal Code: ____________
If this address is a private residence, check this box: ☐
Yes ☐ No ☐

9. (a) If the related person is an investment adviser, is it exempt from registration?
Yes ☐ No ☐
(b) If the answer is yes, under what exemption?

10. (a) Is the related person registered with a foreign financial regulatory authority?
Yes ☐ No ☐
(b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.
No Information Filed

11. Do you and the related person share any supervised persons?
Yes ☐ No ☐

12. Do you and the related person share the same physical location?
Yes ☐ No ☐

1. Legal Name of Related Person:
BAHAMAN GROUP HOLDING LIMITED

2. Primary Business Name of Related Person:
BAHAMAN GROUP HOLDING LIMITED

3. Related Person’s SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
- or Other

4. Related Person’s
(a) CRD Number (if any):
(b) CIK Number(s) (if any):
No Information Filed

5. Related Person is: (check all that apply)
(a) ☐ broker-dealer, municipal securities dealer, or government securities broker or dealer
(b) ☐ other investment adviser (including financial planners)
(c) ☐ registered municipal advisor
(d) ☐ registered security-based swap dealer
(e) ☐ major security-based swap participant
(f) ☐ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
FORM ADV
UNIFORM APPLICATION FOR INVESTMENT ADVISER REGISTRATION AND REPORT BY EXEMPT REPORTING ADVISERS

Primary ... or thrift institution
(i) trust company
(j) accountant or accounting firm
(k) lawyer or law firm
(l) insurance company or agency
(m) pension consultant
(n) real estate broker or dealer
(o) sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
(p) sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

6. Do you control or are you controlled by the related person?

7. Are you and the related person under common control?

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?

   (b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients' funds or securities that are maintained at the related person?

   (c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:

      Number and Street 1: ____________________________
      City: ___________ State: ________ ZIP+4/Postal Code: ________

      If this address is a private residence, check this box: __________

9. (a) If the related person is an investment adviser, is it exempt from registration?

    (b) If the answer is yes, under what exemption?

FOREIGN PRIVATE ADVISER EXEMPTION

10. (a) Is the related person registered with a foreign financial regulatory authority?

    (b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.

      No Information Filed

11. Do you and the related person share any supervised persons?

12. Do you and the related person share the same physical location?

1. Legal Name of Related Person:

   SAFANAD SSCP VI GP LLC

2. Primary Business Name of Related Person:

   SAFANAD SSCP VI GP LLC

3. Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)

   -

   or

   Other

4. Related Person's

   (a) CRD Number (if any):

   (b) CIK Number(s) (if any):

      No Information Filed

5. Related Person is: (check all that apply)

   (a) broker-dealer, municipal securities dealer, or government securities broker or dealer

   (b) other investment adviser (including financial planners)

   (c) registered municipal advisor

   (d) registered security-based swap dealer

   (e) major security-based swap participant

   (f) commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

   (g) futures commission merchant

   (h) banking or thrift institution

   (i) trust company

   (j) accountant or accounting firm

   (k) lawyer or law firm
6. Do you control or are you controlled by the related person?  
   Yes No

7. Are you and the related person under common control?  
   Yes No

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?  
   Yes No

8. (b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients' funds or securities that are maintained at the related person?  
   Yes No

8. (c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:

   | City: |
   | State: | Number and Street 1: |
   | Country: | Number and Street 2: |
   | ZIP+4/Postal Code: |

   If this address is a private residence, check this box:  
   Yes No

9. If the related person is an investment adviser, is it exempt from registration?  
   Yes No

9. (b) If the answer is yes, under what exemption?  
   Other

10. (a) Is the related person registered with a foreign financial regulatory authority?  
   Yes No

10. (b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.  
   No Information Filed

11. Do you and the related person share any supervised persons?  
   Yes No

12. Do you and the related person share the same physical location?  
   Yes No

---

1. Legal Name of Related Person:  
   SSHIP II GP LLC

2. Primary Business Name of Related Person:  
   SSHIP II GP LLC

3. Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-):  
   -
   or
   Other

4. Related Person's  
   (a) CRD Number (if any):  
   No Information Filed

   (b) CIK Number(s) (if any):

5. Related Person is: (check all that apply)  
   (a) broker-dealer, municipal securities dealer, or government securities broker or dealer
   (b) other investment adviser (including financial planners)
   (c) registered municipal advisor
   (d) registered security-based swap dealer
   (e) major security-based swap participant
   (f) commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
   (g) futures commission merchant
   (h) banking or thrift institution
   (i) trust company
   (j) accountant or accounting firm
   (k) lawyer or law firm
   (l) insurance company or agency
   (m) pension consultant
   (n) real estate broker or dealer
   (o) sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
   (p) sponsor, general partner, managing member (or equivalent) of pooled investment vehicles
   Yes No

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SAFANAD INDUSTRY CAPITAL INTERNET INFRASTRUCTURE MANAGEMENT, LLC

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For each custodian.

No Information Filed
6. Do you control or are you controlled by the related person?

7. Are you and the related person under common control?

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?

   (b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients' funds or securities that are maintained at the related person?

   (c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:

       Number and Street 1: __________________________
       Number and Street 2: __________________________
       City: __________________________ State: ________ Country: ________ ZIP+4/Postal Code: ________

         If this address is a private residence, check this box: ☐

9. (a) If the related person is an investment adviser, is it exempt from registration?

   (b) If the answer is yes, under what exemption?

10. (a) Is the related person registered with a foreign financial regulatory authority?

    (b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.

11. Do you and the related person share any supervised persons?

12. Do you and the related person share the same physical location?

---

**Legal Name of Related Person:**
SSOP GP, LLC

**Primary Business Name of Related Person:**
SSOP GP, LLC

**Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)**
-

**Related Person's**

(a) CRD Number (if any):

(b) CIK Number(s) (if any):

   No Information Filed

**Related Person is:** (check all that apply)

(a) ☐ broker-dealer, municipal securities dealer, or government securities broker or dealer

(b) ☐ other investment adviser (including financial planners)

(c) ☐ registered municipal advisor

(d) ☐ registered security-based swap dealer

(e) ☐ major security-based swap participant

(f) ☐ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)

(g) ☐ futures commission merchant

(h) ☐ banking or thrift institution

(i) ☐ trust company

(j) ☐ accountant or accounting firm

(k) ☐ lawyer or law firm

(l) ☐ insurance company or agency

(m) ☐ pension consultant

(n) ☐ real estate broker or dealer

(o) ☒ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles

(p) ☐ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

---

**Do you control or are you controlled by the related person?**

**Are you and the related person under common control?**

**Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?**
4. Related Person's
(a) CRD Number (if any):
(b) CIK Number(s) (if any):
No Information Filed
5. Related Person is: for custody of your clients' assets:
Number and Street 1: Number and Street 2:
City: State: Country: ZIP+4/Postal Code:
Yes No
9. (a) If the related person is an investment adviser, is it exempt from registration?
(b) If the answer is yes, under what exemption?
10. (a) Is the related person registered with a foreign financial regulatory authority?
(b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.
No Information Filed
11. Do you and the related person share any supervised persons?
12. Do you and the related person share the same physical location?

1. Legal Name of Related Person:
SAFANAD (DUBAI) LIMITED

2. Primary Business Name of Related Person:
SAFANAD (DUBAI) LIMITED

3. Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
- or 
Other

4. Related Person's
(a) CRD Number (if any):
(b) CIK Number(s) (if any):
No Information Filed

5. Related Person is: (check all that apply)
(a) broker-dealer, municipal securities dealer, or government securities broker or dealer
(b) other investment adviser (including financial planners)
(c) registered municipal advisor
(d) registered security-based swap dealer
(e) major security-based swap participant
(f) commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
(g) futures commission merchant
(h) banking or thrift institution
(i) trust company
(j) accountant or accounting firm
(k) lawyer or law firm
(l) insurance company or agency
(m) pension consultant
(n) real estate broker or dealer
(o) sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
(p) sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

6. Do you control or are you controlled by the related person?

7. Are you and the related person under common control?

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?
(b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients' funds or securities that are maintained at the related person?
(c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:
Number and Street 1: Number and Street 2:
City: State: Country: ZIP+4/Postal Code:
9. (a) If the related person is an investment adviser, is it exempt from registration?

(b) If the answer is yes, under what exemption?
   FOREIGN PRIVATE ADVISER EXEMPTION

10. (a) Is the related person registered with a foreign financial regulatory authority?

(b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.

   Name of Country/English Name of Foreign Financial Regulatory Authority
   Dubai - Dubai Financial Services Authority

11. Do you and the related person share any supervised persons?

12. Do you and the related person share the same physical location?

---

1. Legal Name of Related Person:
   SAFANAD SENIOR CARE II GP, LLC

2. Primary Business Name of Related Person:
   SAFANAD SENIOR CARE II GP, LLC

3. Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
   -
   or
   Other

4. Related Person's
   (a) CRD Number (if any):
   (b) CIK Number(s) (if any):
      No Information Filed

5. Related Person is: (check all that apply)
   (a) ☑ broker-dealer, municipal securities dealer, or government securities broker or dealer
   (b) ☑ other investment adviser (including financial planners)
   (c) ☑ registered municipal advisor
   (d) ☑ registered security-based swap dealer
   (e) ☑ major security-based swap participant
   (f) ☑ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
   (g) ☑ futures commission merchant
   (h) ☑ banking or thrift institution
   (i) ☑ trust company
   (j) ☑ accountant or accounting firm
   (k) ☑ lawyer or law firm
   (l) ☑ insurance company or agency
   (m) ☑ pension consultant
   (n) ☑ real estate broker or dealer
   (o) ☑ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
   (p) ☑ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

6. Do you control or are you controlled by the related person?

7. Are you and the related person under common control?

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?

(b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients' funds or securities that are maintained at the related person?

(c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:
   Number and Street 1: Number and Street 2:
   City: State: Country: ZIP+4/Postal Code:
   If this address is a private residence, check this box: ☑

9. (a) If the related person is an investment adviser, is it exempt from registration?

(b) If the answer is yes, under what exemption?
10. (a) Is the related person registered with a foreign financial regulatory authority?
   (b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.
      No Information Filed

11. Do you and the related person share any supervised persons?

12. Do you and the related person share the same physical location?

1. Legal Name of Related Person:
   SAFANAD SENIOR CARE V GP, LLC

2. Primary Business Name of Related Person:
   SAFANAD SENIOR CARE V GP, LLC

3. Related Person's SEC File Number (if any) (e.g., 801-, 8-, 866-, 802-)
   -
   or Other

4. Related Person's
   (a) CRD Number (if any):
   (b) CIK Number(s) (if any):
      No Information Filed

5. Related Person is: (check all that apply)
   (a) ☐ broker-dealer, municipal securities dealer, or government securities broker or dealer
   (b) ☐ other investment adviser (including financial planners)
   (c) ☐ registered municipal advisor
   (d) ☐ registered security-based swap dealer
   (e) ☐ major security-based swap participant
   (f) ☐ commodity pool operator or commodity trading advisor (whether registered or exempt from registration)
   (g) ☐ futures commission merchant
   (h) ☐ banking or thrift institution
   (i) ☐ trust company
   (j) ☐ accountant or accounting firm
   (k) ☐ lawyer or law firm
   (l) ☐ insurance company or agency
   (m) ☐ pension consultant
   (n) ☐ real estate broker or dealer
   (o) ☐ sponsor or syndicator of limited partnerships (or equivalent), excluding pooled investment vehicles
   (p) ☐ sponsor, general partner, managing member (or equivalent) of pooled investment vehicles

6. Do you control or are you controlled by the related person?

7. Are you and the related person under common control?

8. (a) Does the related person act as a qualified custodian for your clients in connection with advisory services you provide to clients?
   (b) If you are registering or registered with the SEC and you have answered "yes," to question 8.(a) above, have you overcome the presumption that you are not operationally independent (pursuant to rule 206(4)-2(d)(5)) from the related person and thus are not required to obtain a surprise examination for your clients' funds or securities that are maintained at the related person?
   (c) If you have answered "yes" to question 8.(a) above, provide the location of the related person's office responsible for custody of your clients' assets:
      Number and Street 1: ____________________________
      City: ____________________________ State: ______
      Number and Street 2: ____________________________
      Country: ____________________________ ZIP+4/Postal Code: ______
      If this address is a private residence, check this box: ☐

9. (a) If the related person is an investment adviser, is it exempt from registration?
   (b) If the answer is yes, under what exemption?

10. (a) Is the related person registered with a foreign financial regulatory authority?
    (b) If the answer is yes, list the name and country, in English of each foreign financial regulatory authority with which the related person is registered.
       No Information Filed

11. Do you and the related person share any supervised persons?
### SECTION 7.B.(1) Private Fund Reporting

**Funds per Page:** 15  
Total Funds: 12

#### A. PRIVATE FUND

**Information About the Private Fund**

1. (a) Name of the private fund:
   
   FC SKYFALL, LP

   (b) *Private fund* identification number:

   (include the "805-" prefix also)

   805-2522246392

2. Under the laws of what state or country is the *private fund* organized:

   - **State:**
   - **Country:**

   Cayman Islands

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or persons serving in a similar capacity):

   **Name of General Partner, Manager, Trustee, or Director**

   FC SKYFALL GP LIMITED

   (b) If filing an *umbrella registration*, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this *private fund*.

   **Filing Adviser/Relying Adviser Name**

   SAFANAD GOLDENYE Management Limited

4. The *private fund* (check all that apply; you must check at least one):

   - ☑ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   - ☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the *private fund* is registered.

   **Name of Country/English Name of Foreign Financial Regulatory Authority**

   Cayman Islands - Cayman Islands Monetary Authority

6. (a) Is this a "master fund" in a master-feeder arrangement?

    (b) If yes, what is the name and *private fund* identification number (if any) of the feeder funds investing in this *private fund*?

   **Name of private fund**

   SAFANAD GOLDENYE LIMITED

   **Private fund identification number**

   805-887316564

(c) Is this a "feeder fund" in a master-feeder arrangement?

(d) If yes, what is the name and *private fund* identification number (if any) of the master fund in which this *private fund* invests?

   **Name of private fund**
4. Related Person’s

(a) CRD Number (if any): 

(b) CIK Number(s) (if any): 

No Information Filed

5. Related Person is: 

Yes  [ ]  No  [ ]

6. Does the related person act as a qualified custodian for your account(s)?

Yes  [ ]  No  [ ]

7. Related Person’s role in the fund? (check all that apply; you must check at least one):

Yes  [ ]  No  [ ]

8. Is the related person a “related person”? (check all that apply)

Yes  [ ]  No  [ ]

9. During your most recent fiscal year, did the related person act as a qualified custodian for your account(s)?

Yes  [ ]  No  [ ]

Additional Feeder Fund Information : 1 Record(s) Filed.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:

SAFANAD GOLDENEYE LIMITED

(b) Private fund identification number:

(include the “805-“ prefix also)

805-8873166564

(c) Under the laws of what state or country is the private fund organized:

State: 
Country: 

Cayman Islands

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SAFANAD GOLDENEYE MANAGEMENT LIMITED</td>
</tr>
<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relining Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD GOLDENEYE MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

☑ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

NOTE: For purposes of questions 6 and 7, in a master-feeder arrangement, one or more funds ("feeder funds") invest all or substantially all of their assets in a single fund ("master fund"). A fund would also be a "feeder fund" investing in a "master fund" for purposes of this question if it issued multiple classes (or series) of shares or interests, and each class (or series) invests substantially all of its assets in a single master fund.

8. (a) Is this private fund a “fund of funds”?

Yes  [ ]  No  [ ]

NOTE: For purposes of this question only, answer "yes" if the fund invests 10 percent or more of its total assets in other pooled investment vehicles, regardless of whether they are also private funds or registered investment companies.

(b) If yes, does the private fund invest in funds managed by you or by a related person?

Yes  [ ]  No  [ ]

9. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Company Act of 1940 (other than "money market funds," to the extent provided in Instruction 6.e.)?

Yes  [ ]  No  [ ]

10. What type of fund is the private fund?
11. Current gross asset value of the private fund:
$550,347,311

Ownership

12. Minimum investment commitment required of an investor in the private fund:
$2,651,400
NOTE: Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the private fund's beneficial owners:
56

14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:
15%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds: 0%
(b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:
100%

Your Advisory Services

17. (a) Are you a subadviser to this private fund?

(b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.

<table>
<thead>
<tr>
<th>Name of Other Adviser to private fund</th>
<th>SEC file number</th>
<th>CRD number</th>
</tr>
</thead>
<tbody>
<tr>
<td>FORMATION CAPITAL</td>
<td>801-80200</td>
<td>160400</td>
</tr>
</tbody>
</table>

18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the private fund?

(b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.

19. Are your clients solicited to invest in the private fund?
NOTE: For purposes of this question, do not consider feeder funds of the private fund.

20. Approximately what percentage of your clients has invested in the private fund?
0%

Private Offering

21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933?

22. If yes, provide the private fund's Form D file number (if any):

No Information Filed

B. SERVICE PROVIDERS

Auditors

23. (a) (1) Are the private fund's financial statements subject to an annual audit?
4. Related Person's
   (a) CRD Number (if any):
   No Information Filed
   (b) CIK Number(s) (if any):
   No Information Filed

5. Related Person is:
   custodian's office responsible for custody of the private fund's assets (city, state and country):
   City: 
   State: 
   Country: 

SECTION 7.B.(1)

12. Are you an adviser to any
    registered security-based swap dealer
    (a) 
    (b) 
    (c) 
    (d) 
    (e) 
    (f) 
    (g) 
    (h) 

10. Are you an adviser to any
    other investment adviser (including financial planners)
    (a) 
    (b) 
    (c) 
    (d) 
    (e) 
    (f) 
    (g) 
    (h) 

6. Are you an investment adviser, is it exempt from registration?
   (a) 
   (b) 
   (c) 
   (d) 
   (e) 
   (f) 
   (g) 
   (h) 

11. Is this a "feeder fund" in a master-feeder arrangement?
   (a) 
   (b) 
   (c) 
   (d) 
   (e) 
   (f) 
   (g) 
   (h) 

19. Under the laws of what state or country is the
    private fund
    (a) 
    (b) 
    (c) 
    (d) 
    (e) 
    (f) 
    (g) 
    (h) 

22. Is the auditing firm registered with the Public Company Accounting Oversight Board?
   (a) 
   (b) 
   (c) 
   (d) 
   (e) 
   (f) 
   (g) 
   (h) 

25. Are your
data are reported this information with respect to any such
    sponsor or syndicator of limited partnerships (or equivalent), excluding
    (a) 
    (b) 
    (c) 
    (d) 
    (e) 
    (f) 
    (g) 
    (h) 

Prime Broker

24. (a) Does the private fund use one or more prime brokers?
    (a) 
    (b) 
    (c) 
    (d) 
    (e) 
    (f) 
    (g) 
    (h) 

Custodian

25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets?
    (a) 
    (b) 
    (c) 
    (d) 
    (e) 
    (f) 
    (g) 
    (h) 

Additional Custodian Information: 2 Record(s) Filed.

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

(b) Legal name of custodian:
   MAPLEFS LIMITED

(c) Primary business name of custodian:
   MAPLEFS LIMITED

(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):
   City: 
   State: 
   Country: 

Additional Auditor Information: 1 Record(s) Filed.

If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

(b) Name of the auditing firm:
   KPMG

(c) The location of the auditing firm's office responsible for the private fund's audit (city, state and country):
   City: GRAND CAYMAN
   State: 
   Country: Cayman Islands

(d) Is the auditing firm an independent public accountant?
   Yes  No

(e) Is the auditing firm registered with the Public Company Accounting Oversight Board?
   Yes  No

   If yes, Public Company Accounting Oversight Board-Assigned Number:
   185

(f) If "yes" to (e) above, is the auditing firm subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?
   Yes  No

(g) Are the private fund's audited financial statements for the most recently completed fiscal year distributed to the private fund's investors?
   Yes  No

(h) Do all of the reports prepared by the auditing firm for the private fund since your last annual updating amendment contain unqualified opinions?
   Yes  No  Report Not Yet Received

   If you check "Report Not Yet Received," you must promptly file an amendment to your Form ADV to update your response when the report is available.
### 4. Related Person's

- **(a)** CRD Number (if any):
  - No Information Filed

- **(b)** CIK Number(s) (if any):
  - No Information Filed

### 5. Related Person is:

If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

1. **Related Person's bank or thrift institution**
2. **Do you and the**
   - (a) **persons**
   - (b) **real estate broker or dealer**
   - (c) **trust company**
   - (d) **venture capital fund**
   - (e) **Minimum investment commitment required of an investor in the**
   - (f) **Minimum investment calendar year required of an investor in the**
   - (g) **trust company**
   - (h) **venture capital fund**
   - (i) **private equity fund**
   - (j) **private fund**

### Item 7

#### B. 12. Legal name of custodian:

- NATIONAL WESTMINSTER BANK (RBS)

#### C.

- **(a)** Legal name of custodian:
- **(b)** Legal Name of custodian:
  - SAFANAD GOLDENEYE MANAGEMENT LIMITED

- **(c)** Primary business name of custodian:
  - ROYAL BANK OF SCOTLAND

- **(d)** The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):
  - City: LONDON
  - State: United Kingdom

- **(e)** Is the custodian a related person of your firm?
  - Yes No

- **(f)** If the custodian is a broker-dealer, provide its SEC registration number (if any):
  - CRD Number (if any):

- **(g)** If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)

---

### Administrator

26. **(a)** Does the private fund use an administrator other than your firm?

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

#### Additional Administrator Information : 2 Record(s) Filed.

- **(b)** Name of administrator:
  - MAPLES FUND SERVICES (CAYMAN) LIMITED

- **(c)** Location of administrator (city, state and country):
  - City: GRAND CAYMAN
  - State: Cayman Islands

- **(d)** Is the administrator a related person of your firm?
  - Yes No

- **(e)** Does the administrator prepare and send investor account statements to the private fund's investors?
  - Yes (provided to all investors) Some (provided to some but not all investors) No (provided to no investors)

- **(f)** If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."
If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:
NATIONAL WESTMINSTER BANK

(c) Location of administrator (city, state and country):
City: LONDON
State: Country: United Kingdom

(d) Is the administrator a related person of your firm?
Yes No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?
  [ ] Yes (provided to all investors)  [ ] Some (provided to some but not all investors)  [ ] No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person? 100%

Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.

Marketers

28. (a) Does the private fund use the services of someone other than you or your employees for marketing purposes?

You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer to question 28.(a) is "yes," respond to questions (b) through (g) below for each such marketer the private fund uses. If the private fund uses more than one marketer you must complete questions (b) through (g) separately for each marketer.

Additional Marketer Information : 1 Record(s) Filed.

You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer to question 28.(a) is "yes," respond to questions (b) through (g) below for each such marketer the private fund uses. If the private fund uses more than one marketer, you must complete questions (b) through (g) separately for each marketer.

(b) Is the marketer a related person of your firm?

(c) Name of the marketer:
EVERCORE GROUP L.L.C.

(d) If the marketer is registered with the SEC, its file number (e.g., 801-, 8-, or 866-):
8 - 49830
and CRD Number (if any):
42405

(e) Location of the marketer's office used principally by the private fund (city, state and country):
City: NEW YORK
State: New York
Country: United States

(f) Does the marketer market the private fund through one or more websites?
### A. PRIVATE FUND

#### Information About the Private Fund

1. (a) Name of the **private fund**:  
   FC TRIDENT LLC  
   
   (b) **Private fund identification number**:  
   (include the "805-" prefix also)  
   805-8331640364  

2. Under the laws of what state or country is the **private fund** organized:  
   
<table>
<thead>
<tr>
<th>State</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delaware</td>
<td>United States</td>
</tr>
</tbody>
</table>

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or **persons** serving in a similar capacity):  
   
   **Name of General Partner, Manager, Trustee, or Director**  
   FC TRIDENT MANAGER LLC  
   
   (b) If filing an **umbrella registration**, identify the **filing adviser** and/or **relying adviser(s)** that sponsor(s) or manage(s) this **private fund**.  
   
   **Filing Adviser/Relying Adviser Name**  
   SAFANAD INC.  

4. The **private fund** (check all that apply; you must check at least one):  
   
   - ✔️ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940  
   - ☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940  

5. List the name and country, in English, of each **foreign financial regulatory authority** with which the **private fund** is registered.  
   
   No Information Filed  

6. (a) Is this a "master fund" in a master-feeder arrangement?  
   
   Yes ☐ No ☑  
   
   (b) If yes, what is the name and **private fund identification number** (if any) of the feeder funds investing in this **private fund**?  

<table>
<thead>
<tr>
<th>Name of <strong>private fund</strong></th>
<th><strong>Private fund identification number</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD PENTANGLE HOLDINGS LIMITED</td>
<td>805-8893030703</td>
</tr>
<tr>
<td>SAFANAD PENTANGLE INVESTMENTS LIMITED</td>
<td>805-9994913689</td>
</tr>
<tr>
<td>SAFANAD STAR US FEEDER LP</td>
<td>805-8026941198</td>
</tr>
<tr>
<td>SSC US INVESTORS LLC</td>
<td>805-8018304429</td>
</tr>
</tbody>
</table>

7. (c) Is this a "feeder fund" in a master-feeder arrangement?  
   
   Yes ☑ No ☐  
   
   (d) If yes, what is the name and **private fund identification number** (if any) of the master fund in which this **private fund** invests?  

   **Name of **private fund**:  
   
   **Private fund identification number**:  
   (include the "805-" prefix also)  

   [NOTE: You must complete question 6 for each master-feeder arrangement regardless of whether you are filing a single Schedule D, Section 7.B.(1) for the master-feeder arrangement or reporting on the funds separately.]

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:
4. Related Person's
(a) CRD Number (if any):
(b) CIK Number(s) (if any):
No Information Filed

5. Related Person is: 
for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940


2. Name of General Partner, Manager, Trustee or Director (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARWIN JANNAT</td>
</tr>
<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
</tbody>
</table>

3. If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:
(a) Name of the private fund:
SAFANAD PENTANGLE HOLDINGS LIMITED
(b) Private fund identification number:
(include the “805-” prefix also)
805-8893030703
(c) Under the laws of what state or country is the private fund organized:
State: Country:
Cayman Islands
(d) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARWIN JANNAT</td>
</tr>
<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

- ☑ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- ☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

<table>
<thead>
<tr>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Information Filed</td>
</tr>
</tbody>
</table>
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
   SAFANAD STAR US FEEDER GP, LLC

(b) Private fund identification number:
   (include the "805-" prefix also)
   805-8026941198

(c) Under the laws of what state or country is the private fund organized:
   State: Delaware
   Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD STAR US FEEDER GP, LLC</td>
</tr>
<tr>
<td>SAFANAD, INC.</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD INC.</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):
   - [ ] (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   - [x] (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
   No Information Filed

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
   SAFANAD STAR-1, INC.

(b) Private fund identification number:
   (include the "805-" prefix also)
   805-9300760378

(c) Under the laws of what state or country is the private fund organized:
   State: Delaware
   Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>VINCENT THADEUS PICA (II)</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD INC.</td>
</tr>
</tbody>
</table>

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
   No Information Filed
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SAFANAD STAR-2, INC.

(b) Private fund identification number:
(include the "805-" prefix also)
805-4481856144

(c) Under the laws of what state or country is the private fund organized:
State: Delaware  
Country: United States

(d) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
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<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
<tr>
<td>VINCENT THADDEUS PICA (II)</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

- ☑️ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940
- ☑️ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed
4. Related Person's
(a) CRD Number (if any):
(b) CIK Number(s) (if any):
No Information Filed

5. Related Person is:
10. What type of fund is the private fund?

NOTE: For purposes of questions 6 and 7, in a master-feeder arrangement, one or more funds ("feeder funds") invest all or substantially all of their assets in a single fund ("master fund"). A fund would also be a "feeder fund" investing in a "master fund" for purposes of this question if it issued multiple classes (or series) of shares or interests, and each class (or series) invests substantially all of its assets in a single master fund.
Note: For definitions of these fund types, please see Instruction 6 of the Instructions to Part 1A.

11. Current gross asset value of the private fund:
   $ 10,081,942

Ownership

12. Minimum investment commitment required of an investor in the private fund:
   $ 5,000,000
   NOTE: Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the private fund's beneficial owners:
   49

14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:
   18%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds:
   0%
   (b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?
       Yes No

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:
   54%

Your Advisory Services

17. (a) Are you a subadviser to this private fund?
       Yes No
       (b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.
       No Information Filed

18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the private fund?
       Yes No
       (b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.
       Name of Other Adviser to private fund
       FORMATION CAPITAL
       SEC file number
       801-80200
       CRD number
       160400

19. Are your clients solicited to invest in the private fund?
   NOTE: For purposes of this question, do not consider feeder funds of the private fund.
   Yes No

20. Approximately what percentage of your clients has invested in the private fund?
   0%

Private Offering

21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933?
   Yes No

22. If yes, provide the private fund's Form D file number (if any):
   No Information Filed

B. SERVICE PROVIDERS

Auditors

23. (a) (1) Are the private fund's financial statements subject to an annual audit?
       Yes No
(a) CRD Number (if any):

No Information Filed

(b) CIK Number(s) (if any):

No Information Filed

5. Related Person is: ... must complete questions (b) through (g) separately for each custodian.

(b) Legal name of custodian: MAPLESFS LIMITED

If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its current gross asset value of the

No

Do all of the reports prepared by the auditing firm for the private fund since your last annual updating amendment contain unqualified opinions?

Yes No Report Not Yet Received

If you check "Report Not Yet Received," you must promptly file an amendment to your Form ADV to update your response when the report is available.

Prime Broker

24. (a) Does the private fund use one or more prime brokers?

If the answer to question 24.(a) is "yes," respond to questions (b) through (e) below for each prime broker the private fund uses. If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.

No Information Filed

Custodian

25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets?

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

Additional Custodian Information : 2 Record(s) Filed.

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

(b) Legal name of custodian: CIBC BANCORP USA INC.

(c) Primary business name of custodian: CIBC BANK USA

(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):

City: CHICAGO State: Illinois Country: United States

Yes No

(e) Is the custodian a related person of your firm?

(f) If the custodian is a broker-dealer, provide its SEC registration number (if any):

- CRD Number (if any):

(g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

(b) Legal name of custodian: MAPLESFS LIMITED
4. Related Person's
   (a) CRD Number (if any):
      No Information Filed
   (b) CIK Number(s) (if any):
      No Information Filed
   Related Person is:
      Some (provided to some but not all investors)
      No (provided to no investors)

5. Related Person's
   (a) Are the beneficial owners:
      No
   (1) Are the related persons:
      No
   (2) Does the private fund use a bank or thrift as a qualified custodian:
      Yes
   (3) Are the related persons:
      Yes
   (4) Is the custodian a related person of your firm:
      No
   (5) If the custodian is a broker-dealer, provide its SEC registration number (if any):
      No
   (6) CRD Number (if any):
      No
   (g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any):

---

### Administrator

26. (a) Does the private fund use an administrator other than your firm?
   If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

**Additional Administrator Information : 2 Record(s) Filed.**

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

<table>
<thead>
<tr>
<th>b. Name of administrator:</th>
<th>CORTLAND CAPITAL MARKET SERVICES LLC</th>
</tr>
</thead>
</table>
| c. Location of administrator (city, state and country): | City: CHICAGO  
State: Illinois  
Country: United States |
| d. Is the administrator a related person of your firm? | No |
| e. Does the administrator prepare and send investor account statements to the private fund's investors? | Yes (provided to all investors)  
Some (provided to some but not all investors)  
No (provided to no investors) |
| f. If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? | EACH OF THE MASTER FUND AND THE FEEDER FUNDS USE ONE OF TWO ADMINISTRATORS. BETWEEN THE TWO ADMINISTRATORS, INVESTOR ACCOUNT STATEMENTS ARE SENT TO ALL INVESTORS. |

---

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

<table>
<thead>
<tr>
<th>b. Name of administrator:</th>
<th>MAPLES FUND SERVICES (CAYMAN) LIMITED</th>
</tr>
</thead>
</table>
| c. Location of administrator (city, state and country): | City: GRAND CAYMAN  
State: Cayman Islands |
| d. Is the administrator a related person of your firm? | No |
| e. Does the administrator prepare and send investor account statements to the private fund's investors? | Yes (provided to all investors)  
Some (provided to some but not all investors)  
No (provided to no investors) |
A. PRIVATE FUND

Information About the Private Fund

1. (a) Name of the private fund:
   SAFANAD EDUCATION VENTURES LIMITED

(b) Private fund identification number:
   (include the “805-“ prefix also)
   805-3434566155

2. Under the laws of what state or country is the private fund organized:
   State: Cayman Islands

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or persons serving in a similar capacity):
   Name of General Partner, Manager, Trustee, or Director
   SAFANAD EDUCATION VENTURES MANAGEMENT LIMITED

(b) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund.
   Filing Adviser/Relying Adviser Name
   SAFANAD EDUCATION VENTURES MANAGEMENT LIMITED

4. The private fund (check all that apply; you must check at least one):
   ☑ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   ☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
   Name of Country/English Name of Foreign Financial Regulatory Authority
   Cayman Islands - Cayman Islands Monetary Authority

6. (a) Is this a “master fund” in a master-feeder arrangement?
   Yes ☑ No ☐

(b) If yes, what is the name and private fund identification number (if any) of the feeder funds investing in this private fund?

<table>
<thead>
<tr>
<th>Name of private fund</th>
<th>Private fund identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD EDUCATION VENTURES GLOBAL FEEDER LP</td>
<td>805-4099767498</td>
</tr>
<tr>
<td>SAFANAD EDUCATION VENTURES OFFSHORE FEEDER LP</td>
<td>805-2962041656</td>
</tr>
</tbody>
</table>
4. Related Person's
(a) CRD Number (if any):
(b) CIK Number(s) (if any):
No Information Filed
5. Related Person is:
805-2962041656
(c) Under the laws of what state or country is the private fund organized:
State: Country:

NOTE: You must complete question 6 for each master-feeder arrangement regardless of whether you are filing a single Schedule D, Section 7.B.(1) for the master-feeder arrangement or reporting on the funds separately.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

Additional Feeder Fund Information : 2 Record(s) Filed.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:
(a) Name of the private fund:
SAFANAD EDUCATION VENTURES GLOBAL FEEDER LP
(b) Private fund identification number:
(include the "805-" prefix also)
805-4099767498
(c) Under the laws of what state or country is the private fund organized:
State: Country:
Cayman Islands
(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
Name of General Partner, Manager, Trustee or Director
SAFANAD EDUCATION VENTURES GP LIMITED
(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
Filing Adviser/Relying Adviser Name
SAFANAD EDUCATION VENTURES MANAGEMENT LIMITED
(e) The private fund (check all that apply; you must check at least one):
☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940
(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
Name of Country/English Name of Foreign Financial Regulatory Authority
Cayman Islands - Cayman Islands Monetary Authority

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:
(a) Name of the private fund:
SAFANAD EDUCATION VENTURES OFFSHORE FEEDER LP
(b) Private fund identification number:
(include the "805-" prefix also)
805-2962041656
(c) Under the laws of what state or country is the private fund organized:
State: Country:
(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD EDUCATION VENTURES GP LIMITED</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD EDUCATION VENTURES MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):
- [ ] (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- [x] (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

<table>
<thead>
<tr>
<th>Name of Country/English Name of Foreign Financial Regulatory Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cayman Islands - Cayman Islands Monetary Authority</td>
</tr>
</tbody>
</table>

NOTE: For purposes of questions 6 and 7, in a master-feeder arrangement, one or more funds ("feeder funds") invest all or substantially all of their assets in a single fund ("master fund"). A fund would also be a "feeder fund" investing in a "master fund" for purposes of this question if it issued multiple classes (or series) of shares or interests, and each class (or series) invests substantially all of its assets in a single master fund.

8. (a) Is this private fund a "fund of funds"?
   - [ ] Yes  [x] No

   NOTE: For purposes of this question only, answer "yes" if the fund invests 10 percent or more of its total assets in other pooled investment vehicles, regardless of whether they are also private funds or registered investment companies.

   (b) If yes, does the private fund invest in funds managed by you or by a related person?
   - [ ] Yes  [x] No

9. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Company Act of 1940 (other than "money market funds," to the extent provided in Instruction 6.e.)?
   - [ ] Yes  [x] No

10. What type of fund is the private fund?
    - [ ] hedge fund  [ ] liquidity fund  [x] private equity fund  [ ] real estate fund  [ ] securitized asset fund  [ ] venture capital fund  [ ] Other private fund

    NOTE: For definitions of these fund types, please see Instruction 6 of the Instructions to Part 1A.

11. Current gross asset value of the private fund:
    - $204,572,533

Ownership

12. Minimum investment commitment required of an investor in the private fund:
    - $5,000,000

    NOTE: Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the private fund's beneficial owners:
    - 2

14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:
    - 66%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds:
    - 0%

    (b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?
    - [ ] Yes  [ ] No

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:
Your Advisory Services

17. (a) Are you a subadviser to this private fund? 
   Yes  No

   (b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.
   No Information Filed

18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the private fund? 
   Yes  No

   (b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.
   No Information Filed

19. Are your clients solicited to invest in the private fund? 
   Yes  No

   NOTE: For purposes of this question, do not consider feeder funds of the private fund.

20. Approximately what percentage of your clients has invested in the private fund? 
   0%

Private Offering

21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933? 
   Yes  No

22. If yes, provide the private fund's Form D file number (if any): 
   No Information Filed

B. SERVICE PROVIDERS

Auditors

23. (a) (1) Are the private fund's financial statements subject to an annual audit? 
   Yes  No

   (2) If the answer to question 23.(a)(1) is "yes," are the financial statements prepared in accordance with U.S. GAAP? 
   Yes  No

   If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

   Additional Auditor Information: 1 Record(s) Filed.

   If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

   (b) Name of the auditing firm: 
   GRANT THORNTON

   (c) The location of the auditing firm's office responsible for the private fund's audit (city, state and country):
      City:  GRAND CAYMAN
      State:  Country:  Cayman Islands

   (d) Is the auditing firm an independent public accountant? 
   Yes  No

   (e) Is the auditing firm registered with the Public Company Accounting Oversight Board? 
   Yes  No

   If yes, Public Company Accounting Oversight Board-Assigned Number: 
   248

   (f) If "yes" to (e) above, is the auditing firm subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules? 
   Yes  No

   (g) Are the private fund's audited financial statements for the most recently completed fiscal year distributed to the private fund's investors? 
   Yes  No
24. (a) Does the private fund use one or more prime brokers?
If the answer to question 24.(a) is "yes," respond to questions (b) through (e) below for each prime broker the private fund uses. If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.

<table>
<thead>
<tr>
<th>Prime Broker</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐</td>
<td>☑</td>
</tr>
</tbody>
</table>

No Information Filed

Additional Administrator Information : 1 Record(s) Filed.

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

<table>
<thead>
<tr>
<th>Custodian</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐</td>
<td>☑</td>
</tr>
</tbody>
</table>

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

(b) Legal name of custodian:
MAPLESFS LIMITED

(c) Primary business name of custodian:
MAPLESFS LIMITED

(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):
City: GRAND CAYMAN
State: Cayman Islands

(e) Is the custodian a related person of your firm?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☑</td>
</tr>
</tbody>
</table>

(f) If the custodian is a broker-dealer, provide its SEC registration number (if any):
CRD Number (if any):

(g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)

Additional Administrator Information : 1 Record(s) Filed.

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

<table>
<thead>
<tr>
<th>Administrator</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐</td>
<td>☑</td>
</tr>
</tbody>
</table>

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:
MAPLES FUND SERVICES (CAYMAN) LIMITED

(c) Location of administrator (city, state and country):
City: Cayman Islands
State: Cayman Islands

GRAND CAYMAN Cayman Islands

(d) Is the administrator a related person of your firm?  
   [ ] Yes  [ ] No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?  
   [ ] Yes (provided to all investors)  [ ] Some (provided to some but not all investors)  [ ] No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."
   THE APPLICABLE FUND.

27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person?  
   100%

Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.

Marketers

28. (a) Does the private fund use the services of someone other than you or your employees for marketing purposes?  
   [ ] Yes  [ ] No

You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer to question 28.(a) is "yes," respond to questions (b) through (g) below for each such marketer the private fund uses. If the private fund uses more than one marketer you must complete questions (b) through (g) separately for each marketer.

No Information Filed

A. PRIVATE FUND

Information About the Private Fund

1. (a) Name of the private fund:  
   SAFANAD SENIOR CARE INVESTMENT PARTNERSHIP II CC, LP

   (b) Private fund identification number:  
      (include the "805-" prefix also)  
      805-5289226935

2. Under the laws of what state or country is the private fund organized:  
   State: Delaware  Country: United States

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or persons serving in a similar capacity):  
   Name of General Partner, Manager, Trustee, or Director  
   SAFANAD SENIOR CARE II CC GP, LLC

   (b) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund.  
      Filing Adviser/Relying Adviser Name  
      SAFANAD SENIOR CARE II MANAGEMENT, LLC

4. The private fund (check all that apply; you must check at least one):  
   [ ] (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   [ ] (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.  
   No Information Filed

6. (a) Is this a "master fund" in a master-feeder arrangement?  
   [ ] Yes  [ ] No
4. Related Person’s
(a) CRD Number (if any):
(b) CIK Number(s) (if any):
No Information Filed
5. Related Person is: (check all that apply)
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

<table>
<thead>
<tr>
<th>Name of private fund</th>
<th>Private fund identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>NSSC PARTNERS II, LLC</td>
<td>805-3972891642</td>
</tr>
<tr>
<td>SAFANAD SENIOR CARE II US FEEDER, LLC</td>
<td>805-5430041333</td>
</tr>
<tr>
<td>SSC II CC EQUITY I LIMITED</td>
<td>805-5767967723</td>
</tr>
<tr>
<td>SSC II CC EQUITY II LIMITED</td>
<td>805-6042371296</td>
</tr>
<tr>
<td>SSC US INVESTORS, LLC</td>
<td>805-8018304429</td>
</tr>
<tr>
<td>SSCIP II CC, LLC</td>
<td>805-1534569997</td>
</tr>
</tbody>
</table>

(c) Is this a "feeder fund" in a master-feeder arrangement?
(d) If yes, what is the name and private fund identification number (if any) of the master fund in which this private fund invests?
   Name of private fund:
   Private fund identification number:
   (include the "805-" prefix also)

NOTE: You must complete question 6 for each master-feeder arrangement regardless of whether you are filing a single Schedule D, Section 7.B.(1) for the master-feeder arrangement or reporting on the funds separately.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

Additional Feeder Fund Information: 6 Record(s) Filed.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:
   (a) Name of the private fund:
       NSSC PARTNERS II, LLC
   (b) Private fund identification number:
       (include the "805-" prefix also)
       805-3972891642
   (c) Under the laws of what state or country is the private fund organized:
       State: Delaware
       Country: United States
   (d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
       Name of General Partner, Manager, Trustee or Director
       VINCENT THADDEUS PICA (II)
   (d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
       Filing Adviser/Relying Adviser Name
       SAFANAD INC.
   (e) The private fund (check all that apply; you must check at least one):
       ☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
       ☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940
   (f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
       No Information Filed
SAFANAD SENIOR CARE II US FEEDER, LLC

(b) Private fund identification number: (include the "805-*" prefix also)
805-5430041333

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

(d) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
Name of General Partner, Manager, Trustee or Director
SAFANAD INC.

(d) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
Filing Adviser/Relying Adviser Name
SAFANAD SENIOR CARE II MANAGEMENT, LLC

(e) The private fund (check all that apply; you must check at least one):
☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:
(a) Name of the private fund:
SSC II CC EQUITY I LIMITED

(b) Private fund identification number: (include the "805-*" prefix also)
805-5767967723

(c) Under the laws of what state or country is the private fund organized:
State: Cayman Islands
Country: Cayman Islands

(d) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
Name of General Partner, Manager, Trustee or Director
JOHN MARK BENN
SHERWIN DARIUS JANNAT
ZIAD MOHAMAD HUSSEIN DANNAOUI

(d) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
Filing Adviser/Relying Adviser Name
SAFANAD MANAGEMENT LIMITED

(e) The private fund (check all that apply; you must check at least one):
☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

<table>
<thead>
<tr>
<th>(a) Name of the private fund:</th>
<th>SSC II CC EQUITY II LIMITED</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Private fund identification number:</td>
<td>Include the &quot;805-&quot; prefix also</td>
</tr>
<tr>
<td></td>
<td>805-6042371296</td>
</tr>
<tr>
<td>(c) Under the laws of what state or country is the private fund organized:</td>
<td>State: Cayman Islands</td>
</tr>
<tr>
<td></td>
<td>Country:</td>
</tr>
<tr>
<td>(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):</td>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
<tr>
<td></td>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td></td>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td></td>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
<tr>
<td>(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:</td>
<td>SAFANAD INC.</td>
</tr>
<tr>
<td>(e) The private fund (check all that apply; you must check at least one):</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940</td>
</tr>
<tr>
<td></td>
<td>(2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940</td>
</tr>
<tr>
<td>(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.</td>
<td>No Information Filed</td>
</tr>
</tbody>
</table>

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

<table>
<thead>
<tr>
<th>(a) Name of the private fund:</th>
<th>SSC US INVESTORS, LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Private fund identification number:</td>
<td>Include the &quot;805-&quot; prefix also</td>
</tr>
<tr>
<td></td>
<td>805-8018304429</td>
</tr>
<tr>
<td>(c) Under the laws of what state or country is the private fund organized:</td>
<td>State: Delaware</td>
</tr>
<tr>
<td></td>
<td>Country: United States</td>
</tr>
<tr>
<td>(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):</td>
<td>SAFANAD, INC.</td>
</tr>
<tr>
<td>(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:</td>
<td>SAFANAD INC.</td>
</tr>
<tr>
<td>(e) The private fund (check all that apply; you must check at least one):</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940</td>
</tr>
<tr>
<td></td>
<td>(2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940</td>
</tr>
</tbody>
</table>
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:

SSCIP II CC, LLC

(b) Private fund identification number:

(include the "805-" prefix also)

805-1534569997

(c) Under the laws of what state or country is the private fund organized:

State: Delaware
Country: United States

(d) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD INC.</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

- [ ] (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- [x] (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

NOTE: For purposes of questions 6 and 7, in a master-feeder arrangement, one or more funds ("feeder funds") invest all or substantially all of their assets in a single fund ("master fund"). A fund would also be a "feeder fund" investing in a "master fund" for purposes of this question if it issued multiple classes (or series) of shares or interests, and each class (or series) invests substantially all of its assets in a single master fund.

8. (a) Is this private fund a "fund of funds"?

- [ ] Yes
- [ ] No

NOTE: For purposes of this question only, answer "yes" if the fund invests 10 percent or more of its total assets in other pooled investment vehicles, regardless of whether they are also private funds or registered investment companies.

(b) If yes, does the private fund invest in funds managed by you or by a related person?

- [ ] Yes
- [ ] No

9. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Company Act of 1940 (other than "money market funds," to the extent provided in Instruction 6.e.)?

- [ ] Yes
- [ ] No

10. What type of fund is the private fund?

- [ ] hedge fund
- [ ] liquidity fund
- [ ] private equity fund
- [x] real estate fund
- [ ] securitized asset fund
- [ ] venture capital fund
- [ ] Other private fund:

NOTE: For definitions of these fund types, please see Instruction 6 of the Instructions to Part 1A.

11. Current gross asset value of the private fund:

$ 0

Ownership

12. Minimum investment commitment required of an investor in the private fund:

$ 2,000,000
13. Approximate number of the private fund's beneficial owners:
   30

14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:
   12%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds:
   0%

   (b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:
   39%

Your Advisory Services

17. (a) Are you a subadviser to this private fund?

   (b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.

   No Information Filed

18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.1.A.3.(b)) advise the private fund?

   (b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.

<table>
<thead>
<tr>
<th>Name of Other Adviser to private fund</th>
<th>SEC file number</th>
<th>CRD number</th>
</tr>
</thead>
<tbody>
<tr>
<td>FORMATION CAPITAL</td>
<td>801-80200</td>
<td>160400</td>
</tr>
</tbody>
</table>

19. Are your clients solicited to invest in the private fund?

   NOTE: For purposes of this question, do not consider feeder funds of the private fund.

20. Approximately what percentage of your clients has invested in the private fund:
   0%

Private Offering

21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933?

22. If yes, provide the private fund's Form D file number (if any):

   No Information Filed

B. SERVICE PROVIDERS

Auditors

23. (a) (1) Are the private fund's financial statements subject to an annual audit?

   (2) If the answer to question 23.(a)(1) is "yes," are the financial statements prepared in accordance with U.S. GAAP?
   No Information Filed

   (g) Are the private fund's audited financial statements for the most recently completed fiscal year distributed to the private fund's investors?
   No

   (h) Do all of the reports prepared by the auditing firm for the private fund since your last annual updating amendment contain unqualified opinions?
   No
### Prime Broker

24. (a) Does the private fund use one or more prime brokers?

If the answer to question 24.(a) is "yes," respond to questions (b) through (e) below for each prime broker the private fund uses. If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

No Information Filed

### Custodian

25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets?

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Additional Custodian Information : 4 Record(s) Filed.

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

- Legal name of custodian: JPMORGAN CHASE BANK, N.A.
- Primary business name of custodian: JPMORGAN CHASE BANK, N.A.
- The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):
  - City: NEWARK
  - State: Delaware
  - Country: United States
- Is the custodian a related person of your firm? Yes
- If the custodian is a broker-dealer, provide its SEC registration number (if any):
  - CRD Number (if any):
- If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any):
If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

(b) Legal name of custodian:
MAPLESFS LIMITED

(c) Primary business name of custodian:
MAPLESFS LIMITED

(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):
City: GRAND CAYMAN
State: Country: Cayman Islands

(e) Is the custodian a related person of your firm?

Yes No

(f) If the custodian is a broker-dealer, provide its SEC registration number (if any):
- CRD Number (if any):

(g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

(b) Legal name of custodian:
UBS FINANCIAL SERVICES INC.

(c) Primary business name of custodian:
UBS FINANCIAL SERVICES INC.

(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):
City: NEW YORK
State: New York
Country: United States

(e) Is the custodian a related person of your firm?

Yes No

(f) If the custodian is a broker-dealer, provide its SEC registration number (if any):
- CRD Number (if any):

(g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)

26. (a) Does the private fund use an administrator other than your firm?

Yes No

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

Additional Administrator Information: 2 Record(s) Filed.
If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:
FORMATION CAPITAL, LLC

(c) Location of administrator (city, state and country):
City: ATLANTA
State: Georgia
Country: United States

(d) Is the administrator a related person of your firm? Yes No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?
- Yes (provided to all investors)
- Some (provided to some but not all investors)
- No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

Each of the Master Fund and the Feeder Funds Use One of Two Administrators. Between the Two Administrators, Investor Account Statements Are Sent to All Investors.

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:
MAPLES FUND SERVICES (CAYMAN) LIMITED

(c) Location of administrator (city, state and country):
City: GRAND CAYMAN
State: Cayman Islands

(d) Is the administrator a related person of your firm? Yes No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?
- Yes (provided to all investors)
- Some (provided to some but not all investors)
- No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

Each of the Master Fund and the Feeder Funds Use One of Two Administrators. Between the Two Administrators, Investor Account Statements Are Sent to All Investors.

27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person? 0%

Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.

Marketers

28. (a) Does the private fund use the services of someone other than you or your employees for marketing purposes? Yes No

You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer to question 28.(a) is "yes," respond to questions (b) through (g) below for each such marketer the private fund uses. If the private fund uses more than one marketer you must complete questions (b) through (g) separately for each marketer.

No Information Filed
1. (a) Name of the private fund:
   SAFANAD SENIOR CARE INVESTMENT PARTNERSHIP V, LP

   (b) Private fund identification number:
         (include the “805-” prefix also)
         805-1236531442

2. Under the laws of what state or country is the private fund organized:
   State: Delaware          Country: United States

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or persons serving in a similar capacity):

   Name of General Partner, Manager, Trustee, or Director
   SAFANAD SENIOR CARE V GP, LLC

   (b) If filing an umbrella registration, identify the filing adviser and/or reliance adviser(s) that sponsor(s) or manage(s) this private fund.

   Filing Adviser/Reliance Adviser Name
   SAFANAD SENIOR CARE V MANAGEMENT LLC

4. The private fund (check all that apply; you must check at least one):
   ☑ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   ☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
   No Information Filed

6. (a) Is this a “master fund” in a master-feeder arrangement?

   (b) If yes, what is the name and private fund identification number (if any) of the feeder funds investing in this private fund?

<table>
<thead>
<tr>
<th>Name of private fund</th>
<th>Private fund identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD SENIOR CARE V EQUITY I LIMITED</td>
<td>805-1975783089</td>
</tr>
<tr>
<td>SAFANAD SENIOR CARE V EQUITY II LIMITED</td>
<td>805-207229010</td>
</tr>
<tr>
<td>SAFANAD SENIOR CARE V EQUITY III LIMITED</td>
<td>805-8028903126</td>
</tr>
<tr>
<td>SAFANAD SENIOR CARE V EQUITY IV LIMITED</td>
<td>805-4128726852</td>
</tr>
<tr>
<td>SAFANAD SENIOR CARE V-1, INC</td>
<td>805-3958726181</td>
</tr>
<tr>
<td>SSCI P V INVESTORS, LLC</td>
<td>805-6809218423</td>
</tr>
</tbody>
</table>

   (c) Is this a “feeder fund” in a master-feeder arrangement?

   (d) If yes, what is the name and private fund identification number (if any) of the master fund in which this private fund invests?

   Name of private fund:
   Private fund identification number:
         (include the “805-” prefix also)

NOTE: You must complete question 6 for each master-feeder arrangement regardless of whether you are filing a single Schedule D, Section 7.B.(1) for the master-feeder arrangement or reporting on the funds separately.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

Additional Feeder Fund Information: 6 Record(s) Filed.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

   (a) Name of the private fund:
   SAFANAD SENIOR CARE V EQUITY I LIMITED
Under the laws of what state or country is the private fund organized:

State: Cayman Islands
Country: Cayman Islands

Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
</tbody>
</table>

If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

The private fund (check all that apply; you must check at least one):

☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940
☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940

List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SAFANAD SENIOR CARE V EQUITY II LIMITED

(b) Private fund identification number:
(include the "805-" prefix also)
805-2072229010

(c) Under the laws of what state or country is the private fund organized:

State: Cayman Islands
Country: Cayman Islands

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SAFANAD SENIOR CARE V EQUITY III LIMITED

(b) Private fund identification number:
(include the "850-" prefix also)
805-8028903126

(c) Under the laws of what state or country is the private fund organized:
State: Country:

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SAFANAD SENIOR CARE V-1, INC

(b) Private fund identification number:
(include the "805-" prefix also)
805-3958726181

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>VINCENT THADDEUS PICA (II)</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD INC.</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):
- ☃ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- ☃ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSCIP V INVESTORS, LLC

(b) Private fund identification number:
(include the "805-" prefix also)
805-6809218423

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN RUTLEDGE</td>
</tr>
<tr>
<td>SAFANAD PATRON INVESTORS 1 LIMITED</td>
</tr>
<tr>
<td>VINCENT THADDEUS PICA (II)</td>
</tr>
</tbody>
</table>
File Name: Schedule D
Private Fund: SAFANAD INC.

Section 7.B.(1) (a) Yes ( ) No ( )
Is this a "master fund" in a master-feeder arrangement?

(b) If yes, does the private fund invest in funds managed by you or by a related person?

Yes ( ) No ( )

(c) If yes, are the financial statements prepared in accordance with U.S. GAAP?

Yes ( ) No ( )

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

Filing Adviser/Relying Adviser Name
SAFANAD INC.

(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

NOTE: For purposes of questions 6 and 7, in a master-feeder arrangement, one or more funds ("feeder funds") invest all or substantially all of their assets in a single fund ("master fund"). A fund would also be a "feeder fund" investing in a "master fund" for purposes of this question if it issued multiple classes (or series) of shares or interests, and each class (or series) invests substantially all of its assets in a single master fund.

8. (a) Is this private fund a "fund of funds"?

NOTE: For purposes of this question only, answer "yes" if the fund invests 10 percent or more of its total assets in other pooled investment vehicles, regardless of whether they are also private funds or registered investment companies.

(b) If yes, does the private fund invest in funds managed by you or by a related person?

Yes ( ) No ( )

9. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Company Act of 1940 (other than "money market funds," to the extent provided in Instruction 6.e.)?

Yes ( ) No ( )

10. What type of fund is the private fund?

☐ hedge fund ☐ liquidity fund ☐ private equity fund ☐ real estate fund ☐ securitized asset fund ☐ venture capital fund ☐ Other private fund:

NOTE: For definitions of these fund types, please see Instruction 6 of the Instructions to Part 1A.

11. Current gross asset value of the private fund:

$ 1,472,072

Ownership

12. Minimum investment commitment required of an investor in the private fund:

$ 5,000,000

NOTE: Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the private fund's beneficial owners:

35

14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:

7%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds:

0%

(b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?

Yes ( ) No ( )

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:

50%

Your Advisory Services

17. (a) Are you a subadviser to this private fund?

Yes ( ) No ( )

(b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.
18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the private fund?
   (b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.

<table>
<thead>
<tr>
<th>Name of Other Adviser to private fund</th>
<th>SEC file number</th>
<th>CRD number</th>
</tr>
</thead>
<tbody>
<tr>
<td>FORMATION CAPITAL</td>
<td>801-80200</td>
<td>160400</td>
</tr>
</tbody>
</table>

19. Are your clients solicited to invest in the private fund?
   NOTE: For purposes of this question, do not consider feeder funds of the private fund.

20. Approximately what percentage of your clients has invested in the private fund?
   0%

Private Offering

21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933?

22. If yes, provide the private fund's Form D file number (if any):

   Form D file number
   021-221040

B. SERVICE PROVIDERS

Auditors

23. (a) (1) Are the private fund's financial statements subject to an annual audit?
   (2) If the answer to question 23.(a)(1) is "yes," are the financial statements prepared in accordance with U.S. GAAP?

   If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

   No Information Filed

   (g) Are the private fund's audited financial statements for the most recently completed fiscal year distributed to the private fund's investors?
   (h) Do all of the reports prepared by the auditing firm for the private fund since your last annual updating amendment contain unqualified opinions?

   Yes  No  Report Not Yet Received
   If you check "Report Not Yet Received," you must promptly file an amendment to your Form ADV to update your response when the report is available.

Prime Broker

24. (a) Does the private fund use one or more prime brokers?

   If the answer to question 24.(a) is "yes," respond to questions (b) through (e) below for each prime broker the private fund uses. If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.

   No Information Filed

Custodian

25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets?

   If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

   Additional Custodian Information: 2 Record(s) Filed.
If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

**26. (a) Does the private fund use an administrator other than your firm?**

**Yes**  **No**

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

**Additional Administrator Information : 2 Record(s) Filed.**

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

**b) Name of administrator:**

FORMATION CAPITAL, LLC

**c) Location of administrator (city, state and country):**

CRD Number (if any):
(d) Is the administrator a related person of your firm?

○ Yes  ○ No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?

○ Yes (provided to all investors)  ○ Some (provided to some but not all investors)  ○ No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

EACH OF THE MASTER FUND AND THE FEEDER FUNDS USE ONE OF TWO ADMINISTRATORS. BETWEEN THE TWO ADMINISTRATORS, INVESTOR ACCOUNT STATEMENTS ARE SENT TO ALL INVESTORS.

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:

MAPLES FUND SERVICES (CAYMAN) LIMITED

(c) Location of administrator (city, state and country):

City: GRAND CAYMAN
State: Cayman Islands
Country: Cayman Islands

(d) Is the administrator a related person of your firm?

○ Yes  ○ No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?

○ Yes (provided to all investors)  ○ Some (provided to some but not all investors)  ○ No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

EACH OF THE MASTER FUND AND THE FEEDER FUNDS USE ONE OF TWO ADMINISTRATORS. BETWEEN THE TWO ADMINISTRATORS, INVESTOR ACCOUNT STATEMENTS ARE SENT TO ALL INVESTORS.

27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person? 100%

Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.

Marketers

28. (a) Does the private fund use the services of someone other than you or your employees for marketing purposes?

○ Yes  ○ No

You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer to question 28.(a) is "yes," respond to questions (b) through (g) below for each such marketer the private fund uses. If the private fund uses more than one marketer you must complete questions (b) through (g) separately for each marketer.

No Information Filed

A. PRIVATE FUND

Information About the Private Fund

1. (a) Name of the private fund:

SAFANAD SENIOR CARE INVESTMENT PARTNERSHIP VI, LP

(b) Private fund identification number:

(include the "805-" prefix also)

805-4259622604
2. Under the laws of what state or country is the private fund organized:
   State: Delaware
   Country: United States

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or persons serving in a similar capacity):
   Name of General Partner, Manager, Trustee, or Director
   FC DOMINO GENERAL PARTNER, LLC

   (b) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
   Filing Adviser/Relying Adviser Name
   SAFANAD SSCP VI MANAGEMENT, LLC

4. The private fund (check all that apply; you must check at least one):
   ☑ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   ☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered:
   No Information Filed

6. (a) Is this a "master fund" in a master-feeder arrangement?
   (b) If yes, what is the name and private fund identification number (if any) of the feeder funds investing in this private fund?
<table>
<thead>
<tr>
<th>Name of private fund</th>
<th>Private fund identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSCP VI NEWCO INC.</td>
<td>805-5542599488</td>
</tr>
<tr>
<td>SSCP VI OFFSHORE FEEDER LP</td>
<td>805-1266307871</td>
</tr>
<tr>
<td>SSCP VI SPLITTER LLC</td>
<td>805-6570338046</td>
</tr>
<tr>
<td>SSCP VI US FEEDER LP</td>
<td>805-8531601756</td>
</tr>
</tbody>
</table>

   (c) Is this a "feeder fund" in a master-feeder arrangement?
   (d) If yes, what is the name and private fund identification number (if any) of the master fund in which this private fund invests?
   Name of private fund:
   Private fund identification number:
   (include the "805-" prefix also)

NOTE: You must complete question 6 for each master-feeder arrangement regardless of whether you are filing a single Schedule D, Section 7.B.(1) for the master-feeder arrangement or reporting on the funds separately.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

   Additional Feeder Fund Information : 4 Record(s) Filed.

   7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:
   (a) Name of the private fund:
       SSCP VI NEWCO INC.
   (b) Private fund identification number:
       (include the "805-" prefix also)
       805-5542599488
   (c) Under the laws of what state or country is the private fund organized:
       State: Delaware
       Country: United States
   (d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
### Filing Adviser/Relying Adviser Name

SAFANAD SSCIP VI MANAGEMENT, LLC

### Filing Adviser/Relying Adviser Name

SAFANAD MANAGEMENT LIMITED

### Name of General Partner, Manager, Trustee or Director

SSCIP VI OFFSHORE FEEDER GP LIMITED

### Name of Country/English Name of Foreign Financial Regulatory Authority

Cayman Islands - Cayman Islands Monetary Authority
(c) Under the laws of what state or country is the private fund organized:
State: Delaware Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
Name of General Partner, Manager, Trustee or Director
SAFANAD SSCIP VI GP LLC

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
Filing Adviser/Relying Adviser Name
SAFANAD INC.

(e) The private fund (check all that apply; you must check at least one):
☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☒ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSCIP VI US FEEDER LP

(b) Private fund identification number:
(include the "805-" prefix also)
805-8531601756

(c) Under the laws of what state or country is the private fund organized:
State: Delaware Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
Name of General Partner, Manager, Trustee or Director
SAFANAD SSCIP VI GP LLC

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
Filing Adviser/Relying Adviser Name
SAFANAD SSCIP VI MANAGEMENT, LLC

(e) The private fund (check all that apply; you must check at least one):
☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☒ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed

NOTE: For purposes of questions 6 and 7, in a master-feeder arrangement, one or more funds ("feeder funds") invest all or substantially all of their assets in a single fund ("master fund"). A fund would also be a "feeder fund" investing in a "master fund" for purposes of this question if it issued multiple classes (or series) of shares or interests, and each class (or series) invests substantially all of its assets in a single master fund.

8. (a) Is this private fund a "fund of funds"?
Yes ☐ No ☒

NOTE: For purposes of this question only, answer "yes" if the fund invests 10 percent or more of its total assets in other pooled investment vehicles, regardless of whether they are also private funds or registered investment companies.

(b) If yes, does the private fund invest in funds managed by you or by a related person?

☐ ☐
9. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Company Act of 1940 (other than "money market funds," to the extent provided in Instruction 6.e.)?  

Yes ☐ No ☒

10. What type of fund is the private fund?  
☐ hedge fund ☐ liquidity fund ☐ private equity fund ☐ real estate fund ☐ securitized asset fund ☐ venture capital fund ☐ Other private fund:  

NOTE: For definitions of these fund types, please see Instruction 6 of the Instructions to Part 1A.

11. Current gross asset value of the private fund:  
$ 204,333,715

Ownership

12. Minimum investment commitment required of an investor in the private fund:  
$ 5,000,000  

NOTE: Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the private fund's beneficial owners:  
57

14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:  
11%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds:  
0%  

(b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?  

Yes ☐ No ☒

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:  
38%

Your Advisory Services

17. (a) Are you a subadviser to this private fund?  

Yes ☒ No ☐

(b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.  

No Information Filed

18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the private fund?  

Yes ☒ No ☐

(b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.  

<table>
<thead>
<tr>
<th>Name of Other Adviser to private fund</th>
<th>SEC file number</th>
<th>CRD number</th>
</tr>
</thead>
<tbody>
<tr>
<td>FORMATION CAPITAL</td>
<td>801-80200</td>
<td>160400</td>
</tr>
</tbody>
</table>

19. Are your clients solicited to invest in the private fund?  

NOTE: For purposes of this question, do not consider feeder funds of the private fund.

Yes ☐ No ☒

20. Approximately what percentage of your clients has invested in the private fund?  

0%

Private Offering

21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933?  

Yes ☐ No ☒

22. If yes, provide the private fund's Form D file number (if any):  

Form D file number  
021-264093
B. SERVICE PROVIDERS

23. (a) Are the **private fund**’s financial statements subject to an annual audit?

(1) Yes ☐ No ☐

(2) If the answer to question 23.(a) is “yes,” are the financial statements prepared in accordance with U.S. GAAP?

Yes ☐ No ☐

If the answer to question 23.(a) is “yes,” respond to questions (b) through (h) below. If the **private fund** uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

### Additional Auditor Information : 2 Record(s) Filed.

If the answer to question 23.(a)(1) is “yes,” respond to questions (b) through (h) below. If the **private fund** uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Name of the auditing firm:</td>
<td>DELOITTE &amp; TOUCHE, LLP</td>
</tr>
<tr>
<td>(c) The location of the auditing firm’s office responsible for the <strong>private fund</strong>’s audit (city, state and country):</td>
<td>ATLANTA Georgia United States</td>
</tr>
<tr>
<td>(d) Is the auditing firm an independent public accountant?</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td>(e) Is the auditing firm registered with the Public Company Accounting Oversight Board?</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td>If yes, Public Company Accounting Oversight Board-Assigned Number:</td>
<td>34</td>
</tr>
<tr>
<td>(f) If “yes” to (e) above, is the auditing firm subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?</td>
<td>Yes ☐ No ☐</td>
</tr>
</tbody>
</table>

If the answer to question 23.(a) is “yes,” respond to questions (b) through (h) below. If the **private fund** uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Name of the auditing firm:</td>
<td>GRANT THORNTON</td>
</tr>
<tr>
<td>(c) The location of the auditing firm’s office responsible for the <strong>private fund</strong>’s audit (city, state and country):</td>
<td>GRAND CAYMAN Cayman Islands</td>
</tr>
<tr>
<td>(d) Is the auditing firm an independent public accountant?</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td>(e) Is the auditing firm registered with the Public Company Accounting Oversight Board?</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td>If yes, Public Company Accounting Oversight Board-Assigned Number:</td>
<td>248</td>
</tr>
<tr>
<td>(f) If “yes” to (e) above, is the auditing firm subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?</td>
<td>Yes ☐ No ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>(g) Are the <strong>private fund</strong>’s audited financial statements for the most recently completed fiscal year distributed to the <strong>private fund</strong>’s investors?</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td>(h) Do all of the reports prepared by the auditing firm for the <strong>private fund</strong> since your last annual updating amendment contain unqualified opinions?</td>
<td>Yes ☐ No ☐</td>
</tr>
</tbody>
</table>

If you check “Report Not Yet Received,” you must promptly file an amendment to your Form ADV to update your response when the report is available.

Prime Broker ☐ Yes ☐ No
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>24. (a) Does the private fund use one or more prime brokers?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Additional Custodian Information : 2 Record(s) Filed.**

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

<table>
<thead>
<tr>
<th>(b) Legal name of custodian:</th>
<th>CIBC BANCORP USA INC.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(c) Primary business name of custodian:</td>
<td>CIBC BANK USA</td>
</tr>
<tr>
<td>(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):</td>
<td>CHICAGO, Illinois, United States</td>
</tr>
<tr>
<td>(e) Is the custodian a related person of your firm?</td>
<td>Yes</td>
</tr>
<tr>
<td>(f) If the custodian is a broker-dealer, provide its SEC registration number (if any):</td>
<td>-</td>
</tr>
<tr>
<td>CRD Number (if any):</td>
<td>-</td>
</tr>
<tr>
<td>(g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)</td>
<td>No Information Filed</td>
</tr>
</tbody>
</table>

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

<table>
<thead>
<tr>
<th>(b) Legal name of custodian:</th>
<th>MAPLESFS LIMITED</th>
</tr>
</thead>
<tbody>
<tr>
<td>(c) Primary business name of custodian:</td>
<td>MAPLESFS LIMITED</td>
</tr>
<tr>
<td>(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):</td>
<td>GRAND CAYMAN, Cayman Islands</td>
</tr>
<tr>
<td>(e) Is the custodian a related person of your firm?</td>
<td>No</td>
</tr>
<tr>
<td>(f) If the custodian is a broker-dealer, provide its SEC registration number (if any):</td>
<td>-</td>
</tr>
<tr>
<td>CRD Number (if any):</td>
<td>-</td>
</tr>
<tr>
<td>(g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)</td>
<td>No Information Filed</td>
</tr>
</tbody>
</table>
26. (a) Does the private fund use an administrator other than your firm?

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

**Additional Administrator Information : 2 Record(s) Filed.**

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:

FORMATION CAPITAL LLC

(c) Location of administrator (city, state and country):

City: ATLANTA
State: Georgia
Country: United States

(d) Is the administrator a related person of your firm?

Yes No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?

- Yes (provided to all investors)
- Some (provided to some but not all investors)
- No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

EACH OF THE MASTER FUND AND THE FEEDER FUNDS USE ONE OF TWO ADMINISTRATORS. BETWEEN THE TWO ADMINISTRATORS, INVESTOR ACCOUNT STATEMENTS ARE SENT TO ALL INVESTORS.

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:

MAPLES FUND SERVICES (CAYMAN) LIMITED

(c) Location of administrator (city, state and country):

City: GRAND CAYMAN
State: Cayman Islands

(d) Is the administrator a related person of your firm?

Yes No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?

- Yes (provided to all investors)
- Some (provided to some but not all investors)
- No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

EACH OF THE MASTER FUND AND THE FEEDER FUNDS USE ONE OF TWO ADMINISTRATORS. BETWEEN THE TWO ADMINISTRATORS, INVESTOR ACCOUNT STATEMENTS ARE SENT TO ALL INVESTORS.

27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person?

100%

Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.

Marketers

28. (a) Does the private fund use the services of someone other than you or your employees for marketing purposes?

You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer
A. PRIVATE FUND

Information About the Private Fund

1. (a) Name of the private fund:
   SAFAFAN SENIOR CARE INVESTMENT PARTNERSHIP VIII, LP
   (b) Private fund identification number:
   (include the "805-" prefix also)
   805-5180356012

2. Under the laws of what state or country is the private fund organized:
   State: Delaware
   Country: United States

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee, or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>FC MIDLANDS GENERAL PARTNER, LLC</td>
</tr>
</tbody>
</table>

   (b) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund.

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD SSCIP VIII MANAGEMENT, LLC</td>
</tr>
</tbody>
</table>

4. The private fund (check all that apply; you must check at least one):
   - [ ] (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   - [x] (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

<table>
<thead>
<tr>
<th>Name of the private fund</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Information Filed</td>
<td></td>
</tr>
</tbody>
</table>

6. (a) Is this a "master fund" in a master-feeder arrangement?
   (b) If yes, what is the name and private fund identification number (if any) of the feeder funds investing in this private fund?

<table>
<thead>
<tr>
<th>Name of private fund</th>
<th>Private fund identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSCP VIII EQUITY I LIMITED</td>
<td>805-2932679951</td>
</tr>
<tr>
<td>SSCP VIII EQUITY II LIMITED</td>
<td>805-3744499225</td>
</tr>
<tr>
<td>SSCP VIII INVESTORS, LLC</td>
<td>805-3542118172</td>
</tr>
<tr>
<td>SSCP VIII, INC</td>
<td>805-1624704922</td>
</tr>
</tbody>
</table>

(c) Is this a "feeder fund" in a master-feeder arrangement?
(d) If yes, what is the name and private fund identification number (if any) of the master fund in which this private fund invests?

   Name of private fund:

   Private fund identification number:
   (include the "805-" prefix also)

   Yes No

NOTE: You must complete question 6 for each master-feeder arrangement regardless of whether you are filing a single Schedule D, Section 7.B.(1) for the master-feeder arrangement or reporting on the funds separately.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

   Additional Feeder Fund Information: 4 Record(s) Filed.
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the **private fund**:

SSCIP VIII EQUITY I LIMITED

(b) **Private fund** identification number:

(include the "805-" prefix also)

805-2932679951

(c) Under the laws of what state or country is the **private fund** organized:

State: Cayman Islands

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this **private fund**:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

(e) The **private fund** (check all that apply; you must check at least one):

- [ ] (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- [x] (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the **private fund** is registered.

No Information Filed
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
   SSCIP VIII INVESTORS, LLC

(b) Private fund identification number:
   (include the "805-" prefix also)
   805-3542118172

(c) Under the laws of what state or country is the private fund organized:
   State: Delaware
   Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN RUTLEDGE</td>
</tr>
<tr>
<td>SAFANAD PATRON INVESTORS 1 LIMITED</td>
</tr>
<tr>
<td>VINCENT THADDEUS PICA (II)</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD INC.</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

- (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
   No Information Filed
NOTE: For purposes of questions 6 and 7, in a master-feeder arrangement, one or more funds ("feeder funds") invest all or substantially all of their assets in a single fund ("master fund"). A fund would also be a "feeder fund" investing in a "master fund" for purposes of this question if it issued multiple classes (or series) of shares or interests, and each class (or series) invests substantially all of its assets in a single master fund.

8. (a) Is this private fund a "fund of funds"?
   Yes No

   NOTE: For purposes of this question only, answer "yes" if the fund invests 10 percent or more of its total assets in other pooled investment vehicles, regardless of whether they are also private funds or registered investment companies.

   (b) If yes, does the private fund invest in funds managed by you or by a related person?
   Yes No

9. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Company Act of 1940 (other than "money market funds," to the extent provided in Instruction 6.e.)?
   Yes No

10. What type of fund is the private fund?

    - [ ] hedge fund
    - [ ] liquidity fund
    - [ ] private equity fund
    - [ ] real estate fund
    - [ ] securitized asset fund
    - [ ] venture capital fund
    - [ ] Other private fund:

    NOTE: For definitions of these fund types, please see Instruction 6 of the Instructions to Part 1A.

11. Current gross asset value of the private fund:

    $0

Ownership

12. Minimum investment commitment required of an investor in the private fund:

    $5,000,000

    NOTE: Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the private fund's beneficial owners:

    33

14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:

    15%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds:

    0%

    (b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?

    Yes No

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:

    78%

Your Advisory Services

17. (a) Are you a subadviser to this private fund?

    Yes No

    (b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.
18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the private fund?
   
   (b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.

<table>
<thead>
<tr>
<th>Name of Other Adviser to private fund</th>
<th>SEC file number</th>
<th>CRD number</th>
</tr>
</thead>
<tbody>
<tr>
<td>FORMATION CAPITAL</td>
<td>801-80200</td>
<td>160400</td>
</tr>
</tbody>
</table>

19. Are your clients solicited to invest in the private fund?

   NOTE: For purposes of this question, do not consider feeder funds of the private fund.

20. Approximately what percentage of your clients has invested in the private fund?

   0%

21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933?

22. If yes, provide the private fund's Form D file number (if any):

   Form D file number
   021-264094

B. SERVICE PROVIDERS

Auditors

23. (a) (1) Are the private fund's financial statements subject to an annual audit?

   (2) If the answer to question 23.(a)(1) is "yes," are the financial statements prepared in accordance with U.S. GAAP?

   If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

   No Information Filed

   (g) Are the private fund's audited financial statements for the most recently completed fiscal year distributed to the private fund's investors?

   (h) Do all of the reports prepared by the auditing firm for the private fund since your last annual updating amendment contain unqualified opinions?

   Yes  No  Report Not Yet Received

   If you check "Report Not Yet Received," you must promptly file an amendment to your Form ADV to update your response when the report is available.

Prime Broker

24. (a) Does the private fund use one or more prime brokers?

   If the answer to question 24.(a) is "yes," respond to questions (b) through (e) below for each prime broker the private fund uses. If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.

   No Information Filed

Custodian

25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets?

   If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

   Additional Custodian Information: 2 Record(s) Filed.
17. (a) Has the private fund used any custodians (including the prime brokers listed above)?
Yes No
*Note: For purposes of this question, do not consider feeder funds of the private fund's related persons. If the answer to question 17.(a) is "yes," provide the name and SEC file number, CRD number (if any), and location of the custodian's office responsible for custody of the private fund's assets (city, state and country) for each custodian. If the custodian is a broker-dealer, provide its SEC registration number (if any). If the answer to question 17.(a) is "no," leave this instruction empty.*

<table>
<thead>
<tr>
<th>(a)</th>
<th>Legal name of custodian:</th>
<th>CIBC BANCORP USA INC.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Primary business name of custodian:</td>
<td>CIBC BANK USA</td>
</tr>
<tr>
<td></td>
<td>The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):</td>
<td>CHICAGO Illinois United States</td>
</tr>
</tbody>
</table>

18. (a) Does the private fund use an administrator other than your firm?
Yes No
*Note: For purposes of this question, do not consider feeder funds of the private fund's related persons. If the answer to question 18.(a) is "yes," respond to questions (b) through (f) below for each administrator. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.*

<table>
<thead>
<tr>
<th>(a)</th>
<th>Name of administrator:</th>
<th>CORTLAND CAPITAL MARKET SERVICES LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Location of administrator (city, state and country):</td>
<td>United States</td>
</tr>
</tbody>
</table>

19. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Companies Act of 1940?
Yes No
*Note: For purposes of this question, do not consider feeder funds of the private fund's related persons. If the answer to question 19. is "yes," leave this instruction empty.*

20. The location of the custodian's office responsible for custody of the private fund's assets (city, state and country): |

21. If you check "Report Not Yet Received," you must promptly file an amendment to your Form ADV to update your response when the report is available.

22. If the answer to question 21. is "yes," leave this instruction empty.*

23. (a) If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.
Yes No
*Note: For purposes of this question, do not consider feeder funds of the private fund's related persons. If the answer to question 23.(a) is "yes," respond to questions (b) through (h) below for each prime broker. If the answer to question 23.(a) is "no," leave this instruction empty.*

<table>
<thead>
<tr>
<th>(a)</th>
<th>Name of Other Adviser to private fund:</th>
<th>CIBC BANCORP USA INC.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Location of Other Adviser to private fund:</td>
<td>Chicago, Illinois, United States</td>
</tr>
</tbody>
</table>

24. (a) If the private fund uses more than one administrator, you must complete questions (b) through (g) separately for each administrator.
Yes No
*Note: For purposes of this question, do not consider feeder funds of the private fund's related persons. If the answer to question 24.(a) is "yes," respond to questions (b) through (e) below for each administrator. If the answer to question 24.(a) is "no," leave this instruction empty.*

25. (a) If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

<table>
<thead>
<tr>
<th>(a)</th>
<th>Legal name of custodian:</th>
<th>MAPLESFS LIMITED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Primary business name of custodian:</td>
<td>MAPLESFS LIMITED</td>
</tr>
<tr>
<td></td>
<td>The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):</td>
<td>GRAND CAYMAN Cayman Islands</td>
</tr>
</tbody>
</table>

26. (a) Does the private fund use an administrator other than your firm?
Yes No
*Note: For purposes of this question, do not consider feeder funds of the private fund's related persons. If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.*

<table>
<thead>
<tr>
<th>(a)</th>
<th>Name of administrator:</th>
<th>CORTLAND CAPITAL MARKET SERVICES LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Location of administrator (city, state and country):</td>
<td>United States</td>
</tr>
</tbody>
</table>

Additional Administrator Information : 2 Record(s) Filed.

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator: CORTLAND CAPITAL MARKET SERVICES LLC
9. During your last fiscal year, did the private fund invest in securities issued by investment companies (other than "money market funds," to the extent provided in the private fund's offering documents)?
   (a) Yes
   (b) No

   (c) If the answer to question 9.(a) is "yes," then provide the private fund identification number:
      (include the "805-" prefix also)
      805-5506809303

   (d) Does the administrator prepare and send investor account statements to the private fund's investors?
      (a) Yes (provided to all investors)
      (b) Some (provided to some but not all investors)
      (c) No (provided to no investors)

   (f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

   (b) Name of administrator:
      MAPLES FUND SERVICES (CAYMAN) LIMITED

   (c) Location of administrator (city, state and country):
      City: GRAND CAYMAN
      State: Cayman Islands

   (d) Is the administrator a related person of your firm?
      Yes No

   (e) Does the administrator prepare and send investor account statements to the private fund's investors?
      (a) Yes (provided to all investors)
      (b) Some (provided to some but not all investors)
      (c) No (provided to no investors)

   (f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

   EACH OF THE MASTER FUND AND THE FEEDER FUNDS USE ONE OF TWO ADMINISTRATORS. BETWEEN THE TWO ADMINISTRATORS, INVESTOR ACCOUNT STATEMENTS ARE SENT TO ALL INVESTORS.

27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person?
   100%
   Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.

Marketers

28. (a) Does the private fund use the services of someone other than you or your employees for marketing purposes?
   Yes No

   You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer to question 28.(a) is "yes," respond to questions (b) through (g) below for each such marketer the private fund uses. If the private fund uses more than one marketer you must complete questions (b) through (g) separately for each marketer.

   No Information Filed

A. PRIVATE FUND

Information About the Private Fund

1. (a) Name of the private fund:
   SAFANAD SPECIALIZED CARE INVESTMENT PARTNERSHIP VII, LP

   (b) Private fund identification number:
      (include the "805-" prefix also)
      805-5506809303
2. Under the laws of what state or country is the private fund organized:
   State: Delaware
   Country: United States

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or persons serving in a similar capacity):

   Name of General Partner, Manager, Trustee, or Director
   FC SSCIP VII GP LLC

   (b) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund.

   Filing Adviser/Relying Adviser Name
   SAFANAD SSCIP VII MANAGEMENT, LLC

4. The private fund (check all that apply; you must check at least one):
   ☑ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   ☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

   No Information Filed

6. (a) Is this a “master fund” in a master-feeder arrangement?

   (b) If yes, what is the name and private fund identification number (if any) of the feeder funds investing in this private fund?

<table>
<thead>
<tr>
<th>Name of private fund</th>
<th>Private fund identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSCIP VII EQUITY I LIMITED</td>
<td>805-6949956691</td>
</tr>
<tr>
<td>SSCIP VII EQUITY II LIMITED</td>
<td>805-3274056402</td>
</tr>
<tr>
<td>SSCIP VII EQUITY III LIMITED</td>
<td>805-6142977046</td>
</tr>
<tr>
<td>SSCIP VII EQUITY IV LIMITED</td>
<td>805-3819408766</td>
</tr>
<tr>
<td>SSCIP VII EQUITY LLC</td>
<td>805-8807364353</td>
</tr>
<tr>
<td>SSCIP VII INVESTORS LLC</td>
<td>805-2471931672</td>
</tr>
<tr>
<td>SSCIP VII US FEEDER LP</td>
<td>805-6535712029</td>
</tr>
</tbody>
</table>

   (c) Is this a “feeder fund” in a master-feeder arrangement?

   (d) If yes, what is the name and private fund identification number (if any) of the master fund in which this private fund invests?

   Name of private fund:
   
   Private fund identification number:
   (include the "805-" prefix also)

   NOTE: You must complete question 6 for each master-feeder arrangement regardless of whether you are filing a single Schedule D, Section 7.B.(1) for the master-feeder arrangement or reporting on the funds separately.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

   Additional Feeder Fund Information : 7 Record(s) Filed.

   7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

   (a) Name of the private fund:
       SSCIP VII EQUITY I LIMITED

   (b) Private fund identification number:
       (include the "805-" prefix also)
       805-6949956691

   (c) Under the laws of what state or country is the private fund organized:
       State: Delaware
       Country: United States
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
   SSCIP VII EQUITY II LIMITED

(b) Private fund identification number:
   (include the "805-" prefix also)
   805-3274056402

(c) Under the laws of what state or country is the private fund organized:
   State:
   Cayman Islands
   Country:

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
   Name of General Partner, Manager, Trustee or Director
   JOHN MARK BENN
   SHERWIN DARIUS JANNAT
   ZIAD MOHAMAD HUSSEIN DANNAOUI

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
   Filing Adviser/Relying Adviser Name
   SAFANAD MANAGEMENT LIMITED

(e) The private fund (check all that apply; you must check at least one):
   - (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   - (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
   No Information Filed
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:

SSCIP VII EQUITY IV LIMITED

(b) Private fund identification number:

(include the "805-" prefix also)

805-3819408766

(c) Under the laws of what state or country is the private fund organized:

State: Country:

Cayman Islands

(d (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

Name of General Partner, Manager, Trustee or Director

JOHN MARK BENN

SHERWIN DARIUS JANNAT

ZIAD MOHAMAD HUSSEIN DANAOU

(d (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

Filing Adviser/Relying Adviser Name

SAFANAD MANAGEMENT LIMITED

(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940

☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSCIP VII EQUITY LLC

(b) Private fund identification number:
(include the "805-" prefix also)
805-8807364353

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

Name of General Partner, Manager, Trustee or Director
JOHN MARK BENN
SHERWIN DARIUS JANNAT
ZIAD DANNOUI

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

Filing Adviser/Relying Adviser Name
SAFANAD SSCIP VII MANAGEMENT, LLC

(e) The private fund (check all that apply; you must check at least one):
☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSCIP VII US FEEDER LP

(b) Private fund identification number:
(include the "805-" prefix also)
805-6535712029

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

Name of General Partner, Manager, Trustee or Director
SAFANAD SSCIP VII GP LLC

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

Filing Adviser/Relying Adviser Name
SAFANAD SSCIP VII MANAGEMENT, LLC

(e) The private fund (check all that apply; you must check at least one):
- ☑ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- ☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

NOTE: For purposes of questions 6 and 7, in a master-feeder arrangement, one or more funds ("feeder funds") invest all or substantially all of their assets in a single fund ("master fund"). A fund would also be a "feeder fund" investing in a "master fund" for purposes of this question if it issued multiple classes (or series) of shares or interests, and each class (or series) invests substantially all of its assets in a single master fund.

8. (a) Is this private fund a "fund of funds"?

NOTE: For purposes of this question only, answer "yes" if the fund invests 10 percent or more of its total assets in other pooled investment vehicles, regardless of whether they are also private funds or registered investment companies.

(b) If yes, does the private fund invest in funds managed by you or by a related person?

Yes No

9. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Company Act of 1940 (other than "money market funds," to the extent provided in Instruction 6.e.)?

Yes No

10. What type of fund is the private fund?

- ☑ hedge fund
- ☑ liquidity fund
- ☑ private equity fund
- ☑ real estate fund
- ☑ securitized asset fund
- ☑ venture capital fund
- ☑ Other private fund:

NOTE: For definitions of these fund types, please see Instruction 6 of the Instructions to Part 1A.

11. Current gross asset value of the private fund:

$1,580,478

Ownership
12. Minimum investment commitment required of an investor in the **private fund**: $5,000,000  
**NOTE:** Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the **private fund's** beneficial owners: 54

14. What is the approximate percentage of the **private fund** beneficially owned by you and your related persons: 16%

15. (a) What is the approximate percentage of the **private fund** beneficially owned (in the aggregate) by funds of funds:

   0%

   **Yes**  **No**

   (b) If the **private fund** qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?

   No Information Filed

16. What is the approximate percentage of the **private fund** beneficially owned by non-**United States persons**: 64%

**Your Advisory Services**

17. (a) Are you a subadviser to this **private fund**?

   **Yes**  **No**

   (b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the **private fund**. If the answer to question 17.(a) is "no," leave this question blank.

   **No Information Filed**

18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the **private fund**?

   **Yes**  **No**

   (b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the **private fund**. If the answer to question 18.(a) is "no," leave this question blank.

<table>
<thead>
<tr>
<th><strong>Name of Other Adviser to private fund</strong></th>
<th><strong>SEC file number</strong></th>
<th><strong>CRD number</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>FORMATION CAPITAL</td>
<td>801-80200</td>
<td>160400</td>
</tr>
</tbody>
</table>

**Private Offering**

19. Are your clients solicited to invest in the **private fund**?

   **Yes**  **No**

   **NOTE:** For purposes of this question, do not consider feeder funds of the **private fund**.

20. Approximately what percentage of your clients has invested in the **private fund**?

   0%

**B. SERVICE PROVIDERS**

**Auditors**

23. (a) (1) Are the **private fund's** financial statements subject to an annual audit?

   **Yes**  **No**

   (2) If the answer to question 23.(a)(1) is "yes," are the financial statements prepared in accordance with U.S. GAAP?

   **Yes**  **No**

   If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the **private fund** uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

   **No Information Filed**
(g) Are the private fund’s audited financial statements for the most recently completed fiscal year distributed to the private fund’s investors? 

☐ Yes ☐ No ☐ Report Not Yet Received

If you check “Report Not Yet Received,” you must promptly file an amendment to your Form ADV to update your response when the report is available.

Prime Broker

24. (a) Does the private fund use one or more prime brokers?

If the answer to question 24.(a) is “yes,” respond to questions (b) through (e) below for each prime broker the private fund uses. If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.

| No Information Filed |

Custodian

25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets?

If the answer to question 25.(a) is “yes,” respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

Additional Custodian Information : 2 Record(s) Filed.

If the answer to question 25.(a) is “yes,” respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

(b) Legal name of custodian:
CIBC BANCORP USA INC.

(c) Primary business name of custodian:
CIBC BANK USA

(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):
City: CHICAGO State: Illinois Country: United States

(e) Is the custodian a related person of your firm?

☐ Yes ☐ No

(f) If the custodian is a broker-dealer, provide its SEC registration number (if any):
CRD Number (if any):

(g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)

If the answer to question 25.(a) is “yes,” respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

(b) Legal name of custodian:
MAPLESFS LIMITED

(c) Primary business name of custodian:
MAPLESFS LIMITED

(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):
City: GRAND CAYMAN State: Cayman Islands

Yes No
26. (a) Does the private fund use an administrator other than your firm?

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

**Additional Administrator Information : 2 Record(s) Filed.**

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:

CORTLAND CAPITAL MARKET SERVICES LLC

(c) Location of administrator (city, state and country):

City: CHICAGO
State: Illinois
Country: United States

(d) Is the administrator a related person of your firm?

Yes No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?

- Yes (provided to all investors)
- Some (provided to some but not all investors)
- No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

EACH OF THE MASTER FUND AND THE FEEDER FUNDS USE ONE OF TWO ADMINISTRATORS. BETWEEN THE TWO ADMINISTRATORS, INVESTOR ACCOUNT STATEMENTS ARE SENT TO ALL INVESTORS.

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:

MAPLES FUND SERVICES (CAYMAN) LIMITED

(c) Location of administrator (city, state and country):

City: GRAND CAYMAN
State: Cayman Islands
Country: Cayman Islands

(d) Is the administrator a related person of your firm?

Yes No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?

- Yes (provided to all investors)
- Some (provided to some but not all investors)
- No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

EACH OF THE MASTER FUND AND THE FEEDER FUNDS USE ONE OF TWO ADMINISTRATORS. BETWEEN THE TWO ADMINISTRATORS, INVESTOR ACCOUNT STATEMENTS ARE SENT TO ALL INVESTORS.
27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person? 
100%
Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.

Marketers

28. (a) Does the private fund use the services of someone other than you or your employees for marketing purposes?

You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer to question 28.(a) is "yes," respond to questions (b) through (g) below for each such marketer the private fund uses. If the private fund uses more than one marketer you must complete questions (b) through (g) separately for each marketer.

No Information Filed

A. PRIVATE FUND

Information About the Private Fund

1. (a) Name of the private fund:
SAFANAD STUDENT HOUSING DEVELOPMENT INVESTMENT PARTNERSHIP I, LP

(b) Private fund identification number:
(include the "805-" prefix also)
805-3086747387

2. Under the laws of what state or country is the private fund organized:

State: Delaware
Country: United States

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or persons serving in a similar capacity):

Name of General Partner, Manager, Trustee, or Director
SSHDIP I GP, LLC

(b) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund.

Filing Adviser/Relying Adviser Name
SSHDIP I MANAGEMENT LLC

4. The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

6. (a) Is this a "master fund" in a master-feeder arrangement?

(b) If yes, what is the name and private fund identification number (if any) of the feeder funds investing in this private fund?

<table>
<thead>
<tr>
<th>Name of private fund</th>
<th>Private fund identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSHDIP EQUITY I LIMITED</td>
<td>805-7816528249</td>
</tr>
<tr>
<td>SSHDIP EQUITY II LIMITED</td>
<td>805-6267288154</td>
</tr>
<tr>
<td>SSHDIP EQUITY III LIMITED</td>
<td>805-3583479105</td>
</tr>
<tr>
<td>SSHDIP EQUITY IV LIMITED</td>
<td>805-3182482880</td>
</tr>
<tr>
<td>SSHDIP I HOLDINGS, LLC</td>
<td>805-5921691199</td>
</tr>
<tr>
<td>SSHDIP I INVESTORS, LLC</td>
<td>805-8189508516</td>
</tr>
<tr>
<td>SSHDIP I US FEEDER, LP</td>
<td>805-9868458000</td>
</tr>
<tr>
<td>SSHDIP I-1, INC.</td>
<td>805-4063314745</td>
</tr>
<tr>
<td>SSHDIP I-2, INC.</td>
<td>805-4561227650</td>
</tr>
<tr>
<td>SSHDIP I-3, INC.</td>
<td>805-4775952084</td>
</tr>
</tbody>
</table>
(c) Is this a "feeder fund" in a master-feeder arrangement?
Yes No

(d) If yes, what is the name and private fund identification number (if any) of the master fund in which this private fund invests?

Name of private fund:

Private fund identification number:
(include the "805-" prefix also)

NOTE: You must complete question 6 for each master-feeder arrangement regardless of whether you are filing a single Schedule D, Section 7.B.(1) for the master-feeder arrangement or reporting on the funds separately.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

Additional Feeder Fund Information : 10 Record(s) Filed.

<table>
<thead>
<tr>
<th>Name of the private fund</th>
<th>SSHDIP EQUITY I LIMITED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private fund identification number:</td>
<td>805-7816528249</td>
</tr>
<tr>
<td>Under the laws of what state or country is the private fund organized:</td>
<td>State: Country:</td>
</tr>
<tr>
<td>Country:</td>
<td>Cayman Islands</td>
</tr>
<tr>
<td>Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):</td>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td></td>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td></td>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
<tr>
<td>Filing Adviser/Relying Adviser Name</td>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
<tr>
<td>The private fund (check all that apply; you must check at least one):</td>
<td>(1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940</td>
</tr>
<tr>
<td></td>
<td>(2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940</td>
</tr>
<tr>
<td>Name of Country/English Name of Foreign Financial Regulatory Authority</td>
<td>Cayman Islands - Cayman Islands Monetary Authority</td>
</tr>
</tbody>
</table>

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:

SSHDIP EQUITY II LIMITED

(b) Private fund identification number:
(include the "805-" prefix also)

805-6267288154
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund.
SSHDIP EQUITY III LIMITED

(b) Private fund identification number:
(include the “805-” prefix also)
805-3583479105

(c) Under the laws of what state or country is the private fund organized:
State: Country:
Cayman Islands

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
Name of General Partner, Manager, Trustee or Director
JOHN MARK BENN
SHERWIN DARIUS JANNAT
ZIAD MOHAMAD HUSSEIN DANNAOUI

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
Filing Adviser/Relying Adviser Name
SAFANAD MANAGEMENT LIMITED

(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
Name of Country/English Name of Foreign Financial Regulatory Authority
Cayman Islands - Cayman Islands Monetary Authority
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the **private fund**:
SSHDIP I HOLDINGS, LLC

(b) **Private fund** identification number:
(include the "805-" prefix also)
805-5921691199

(c) Under the laws of what state or country is the **private fund** organized:
State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
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<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this **private fund**:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

(e) The **private fund** (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the **private fund** is registered.

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Cayman Islands - Cayman Islands Monetary Authority</td>
</tr>
</tbody>
</table>
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSHDIP I INVESTORS, LLC

(b) Private fund identification number:
(include the "805-" prefix also)
805-8189508516

(c) Under the laws of what state or country is the private fund organized:
State: Delaware  Country: United States

(d (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN RUTLEDGE</td>
</tr>
<tr>
<td>SAFANAD PATRON INVESTORS 1 LIMITED</td>
</tr>
<tr>
<td>VINCENT THADDEUS PICA (II)</td>
</tr>
</tbody>
</table>

(d (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD INC.</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):
- (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed

---

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSHDIP I US FEEDER, LP

(b) Private fund identification number:
(include the "805-" prefix also)
805-9868458000

(c) Under the laws of what state or country is the private fund organized:
State: Delaware  Country: United States

(d (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
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<tr>
<td>SSHDIP I GP LLC</td>
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(d (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

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</tr>
</thead>
<tbody>
<tr>
<td>SSHDIP I MANAGEMENT LLC</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSHDIP I-1, INC.

(b) Private fund identification number:
(include the "805-" prefix also)
805-4063314745

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
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(e) The private fund (check all that apply; you must check at least one):
- [ ] (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- [x] (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

   No Information Filed
9. During your last fiscal year, did the private fund invest in securities issued by investment companies under section 3(c)(1) of the Investment Company Act of 1940 ("money market funds"); if yes, indicate the nature of each fund that invests in money market funds, to the extent provided in Instruction 6.e.)?

10. What type of fund is the private fund?
11. Current gross asset value of the private fund:
   $14,148,690

Ownership

12. Minimum investment commitment required of an investor in the private fund:
   $5,000,000

   NOTE: Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the private fund's beneficial owners:
   11

14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:
   24%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds:
   0%

   (b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?

   Yes   No

   (c) If yes, provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 15.(a) is "no," leave this question blank.

   No Information Filed

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:
   100%

Your Advisory Services

17. (a) Are you a subadviser to this private fund?
   Yes   No

   (b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.

   No Information Filed

18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the private fund?
   Yes   No

   (b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.

   No Information Filed

19. Are your clients solicited to invest in the private fund?
   Yes   No

   NOTE: For purposes of this question, do not consider feeder funds of the private fund.

20. Approximately what percentage of your clients has invested in the private fund?
   0%

Private Offering

21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933?
   Yes   No

22. If yes, provide the private fund's Form D file number (if any):

   Form D file number
   021-267492

B. SERVICE PROVIDERS

Auditors

23. (a) Are the private fund's financial statements subject to an annual audit?
   Yes   No
(2) If the answer to question 23.(a)(1) is "yes," are the financial statements prepared in accordance with U.S. GAAP?

If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

### Additional Auditor Information: 1 Record(s) Filed.

If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Name of the auditing firm:</td>
<td>GRANT THORNTON</td>
<td></td>
</tr>
<tr>
<td>(c) The location of the auditing firm's office responsible for the private fund's audit (city, state and country):</td>
<td>GRAND CAYMAN</td>
<td>GRANT THORNTON</td>
</tr>
<tr>
<td>(d) Is the auditing firm an independent public accountant?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>(e) Is the auditing firm registered with the Public Company Accounting Oversight Board?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>If yes, Public Company Accounting Oversight Board-Assigned Number:</td>
<td>248</td>
<td></td>
</tr>
<tr>
<td>(f) If &quot;yes&quot; to (e) above, is the auditing firm subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>(g) Are the private fund's audited financial statements for the most recently completed fiscal year distributed to the private fund's investors?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>(h) Do all of the reports prepared by the auditing firm for the private fund since your last annual updating amendment contain unqualified opinions?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

If you check "Report Not Yet Received," you must promptly file an amendment to your Form ADV to update your response when the report is available.

### Prime Broker

24. (a) Does the private fund use one or more prime brokers?

If the answer to question 24.(a) is "yes," respond to questions (b) through (e) below for each prime broker the private fund uses. If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.

<table>
<thead>
<tr>
<th></th>
<th>No Information Filed</th>
</tr>
</thead>
</table>

### Custodian

25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets?

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

### Additional Custodian Information: 1 Record(s) Filed.

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Legal name of custodian:</td>
<td>MAPLESFS LIMITED</td>
</tr>
<tr>
<td>(c) Primary business name of custodian:</td>
<td>MAPLESFS LIMITED</td>
</tr>
<tr>
<td>(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):</td>
<td>City:</td>
</tr>
</tbody>
</table>

No Information Filed
26. (a) Does the private fund use an administrator other than your firm?

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

**Additional Administrator Information : 1 Record(s) Filed.**

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:

MAPLES FUND SERVICES (CAYMAN) LIMITED

(c) Location of administrator (city, state and country):

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>GRAND CAYMAN</td>
<td></td>
<td>Cayman Islands</td>
</tr>
</tbody>
</table>

(d) Is the administrator a related person of your firm?

Yes No

(e) Does the administrator prepare and send investor account statements to the private fund's investors?

Yes (provided to all investors)  Some (provided to some but not all investors)  No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

THE APPLICABLE FUND.

27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person?

100%

Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.

28. (a) Does the private fund use the services of someone other than you or your employees for marketing purposes?

You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer to question 28.(a) is "yes," respond to questions (b) through (g) below for each such marketer the private fund uses. If the private fund uses more than one marketer you must complete questions (b) through (g) separately for each marketer.

No Information Filed
1. (a) Name of the private fund:
   SAFANAD STUDENT HOUSING INVESTMENT PARTNERSHIP I, LP

   (b) Private fund identification number:
       (include the "805-" prefix also)
       805-5205548520

2. Under the laws of what state or country is the private fund organized:
   State: Delaware
   Country: United States

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee, or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSHIP I GP LLC</td>
</tr>
</tbody>
</table>

   (b) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund.

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSHIP I MANAGEMENT LLC</td>
</tr>
</tbody>
</table>

4. The private fund (check all that apply; you must check at least one):
   - [ ] (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   - [x] (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
   - No Information Filed

6. (a) Is this a "master fund" in a master-feeder arrangement?
   - [ ] Yes
   - [ ] No

   (b) If yes, what is the name and private fund identification number (if any) of the feeder funds investing in this private fund?

<table>
<thead>
<tr>
<th>Name of private fund</th>
<th>Private fund identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>SSHIP I EQUITY I LIMITED</td>
<td>805-1824586253</td>
</tr>
<tr>
<td>SSHIP I EQUITY II LIMITED</td>
<td>805-7090813386</td>
</tr>
<tr>
<td>SSHIP I EQUITY III LIMITED</td>
<td>805-4743823708</td>
</tr>
<tr>
<td>SSHIP I EQUITY IV LIMITED</td>
<td>805-7766370137</td>
</tr>
<tr>
<td>SSHIP I HOLDINGS , LLC</td>
<td>805-2510247636</td>
</tr>
<tr>
<td>SSHIP I INVESTORS, LLC</td>
<td>805-4374227882</td>
</tr>
<tr>
<td>SSHIP I US FEEDER LP</td>
<td>805-9883411573</td>
</tr>
<tr>
<td>SSHIP I-1, INC.</td>
<td>805-9843310449</td>
</tr>
<tr>
<td>SSHIP I-2, INC.</td>
<td>805-3772120278</td>
</tr>
<tr>
<td>SSHIP I-3, INC.</td>
<td>805-3601304357</td>
</tr>
<tr>
<td>SSHIP I-4, INC.</td>
<td>805-2290486539</td>
</tr>
</tbody>
</table>

   (c) Is this a "feeder fund" in a master-feeder arrangement?
   - [ ] Yes
   - [ ] No

   (d) If yes, what is the name and private fund identification number (if any) of the master fund in which this private fund invests?

   - Name of private fund:
   - Private fund identification number:
       (include the "805-" prefix also)

NOTE: You must complete question 6 for each master-feeder arrangement regardless of whether you are filing a single Schedule D, Section 7.B.(1) for the master-feeder arrangement or reporting on the funds separately.

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

   Additional Feeder Fund Information : 11 Record(s) Filed.

   7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:
(a) Name of the private fund:
SSHIP I EQUITY I LIMITED

(b) Private fund identification number:
(include the "805-" prefix also)
805-1824586253

(c) Under the laws of what state or country is the private fund organized:
State: Country:
Cayman Islands

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
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<tbody>
<tr>
<td>JOHN MARK BENN</td>
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<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
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(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

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<td>SAFANAD MANAGEMENT LIMITED</td>
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(e) The private fund (check all that apply; you must check at least one):

- (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

<table>
<thead>
<tr>
<th>Name of Country/English Name of Foreign Financial Regulatory Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cayman Islands - Cayman Islands Monetary Authority</td>
</tr>
</tbody>
</table>
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSHIP I EQUITY III LIMITED

(b) Private fund identification number:
(include the "805-" prefix also)
805-4743823708

(c) Under the laws of what state or country is the private fund organized:
State: Country:
Cayman Islands

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

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(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

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<td>Cayman Islands - Cayman Islands Monetary Authority</td>
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</tbody>
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7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSSHIP I EQUITY IV LIMITED

(b) Private fund identification number:
(include the "805-" prefix also)
805-7766370137

(c) Under the laws of what state or country is the private fund organized:
State: Country:
Cayman Islands

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

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<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
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</table>
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSHIP I HOLDINGS, LLC

(b) Private fund identification number:
(include the "805-" prefix also)
805-2510247636

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

d (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
Name of General Partner, Manager, Trustee or Director
SSHIP I GP LLC

d (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
Filing Adviser/Relying Adviser Name
SAFANAD INC.

e) The private fund (check all that apply; you must check at least one):
☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
Name of Country/English Name of Foreign Financial Regulatory Authority
Cayman Islands - Cayman Islands Monetary Authority

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSHIP I INVESTORS, LLC

(b) Private fund identification number:
(include the "805-" prefix also)
805-4374227882

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

d (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

Filing Adviser/Relying Adviser Name
SAFANAD INC.

e) The private fund (check all that apply; you must check at least one):
☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed
(d) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

**Filing Adviser/Relying Adviser Name**

SAFANAD INC.

(e) The private fund (check all that apply; you must check at least one):

☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:

SSHIP I US FEEDER LP

(b) Private fund identification number:

(include the "805-" prefix also)

805-9883411573

(c) Under the laws of what state or country is the private fund organized:

State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

**Name of General Partner, Manager, Trustee or Director**

SSHIP I GP LLC

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

**Filing Adviser/Relying Adviser Name**

SSSHIP I MANAGEMENT LLC

(e) The private fund (check all that apply; you must check at least one):

☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:
   (a) Name of the private fund:
       SSHIP I-3, INC.
   (b) Private fund identification number:
       (include the “805-” prefix also)
       805-3772120278
   (c) Under the laws of what state or country is the private fund organized:
       State: Delaware
       Country: United States
   (d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
       | Name of General Partner, Manager, Trustee or Director |
       |-------------------------------------------------------|
       | JOHN MARK BENN                                        |
       | SHERWIN DARIUS JANNAT                                  |
       | VINCENT THADDEUS PICA (II)                             |
   (d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:
       | Filing Adviser/Relying Adviser Name |
       |-------------------------------------|
       | SAFANAD INC.                          |
   (e) The private fund (check all that apply; you must check at least one):
       •  (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
       •  (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940
   (f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
       No Information Filed
Private fund identification number:
(include the "805-" prefix also)
805-3601304357

Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>VINCENT THADDEUS PICA (II)</td>
</tr>
</tbody>
</table>

If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD INC.</td>
</tr>
</tbody>
</table>

The private fund (check all that apply; you must check at least one):

- ☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- ✔ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSHIP I-4, INC.

(b) Private fund identification number:
(include the "805-" prefix also)
805-2290486539

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>VINCENT THADDEUS PICA (II)</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD INC.</td>
</tr>
</tbody>
</table>

The private fund (check all that apply; you must check at least one):

- ☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- ✔ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed
8. (a) Is this private fund a "fund of funds"?
   Yes No
   O  O
   NOTE: For purposes of this question only, answer "yes" if the fund invests 10 percent or more of its total assets in other pooled investment vehicles, regardless of whether they are also private funds or registered investment companies.
   (b) If yes, does the private fund invest in funds managed by you or by a related person?
   Yes No

9. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Company Act of 1940 (other than "money market funds," to the extent provided in Instruction 6.a.)?
   O  O

10. What type of fund is the private fund?
   O hedge fund O liquidity fund O private equity fund  O real estate fund  O securitized asset fund  O venture capital fund  O Other private fund:

   NOTE: For definitions of these fund types, please see Instruction 6 of the Instructions to Part 1A.

11. Current gross asset value of the private fund:
   $ 82,394,844

Ownership

12. Minimum investment commitment required of an investor in the private fund:
   $ 5,000,000

   NOTE: Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the private fund's beneficial owners:

   22

14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:

   18%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds:
   0%

   (b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?
   Yes No

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:

   96%

Your Advisory Services

17. (a) Are you a subadviser to this private fund?
   Yes No
   O  O

   (b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.

   No Information Filed

18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the private fund?
   Yes No
   O  O

   (b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.

   No Information Filed

19. Are your clients solicited to invest in the private fund?

   NOTE: For purposes of this question, do not consider feeder funds of the private fund.

20. Approximately what percentage of your clients has invested in the private fund?

   0%
21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933?

   Yes  No

22. If yes, provide the private fund's Form D file number (if any):

   Form D file number
   021-267499

B. SERVICE PROVIDERS

Auditors

23. (a) (1) Are the private fund's financial statements subject to an annual audit?

   Yes  No

   (2) If the answer to question 23.(a)(1) is "yes," are the financial statements prepared in accordance with U.S. GAAP?

   Yes  No

If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

Additional Auditor Information : 1 Record(s) Filed.

   If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

   (b) Name of the auditing firm:

   GRANT THORNTON

   (c) The location of the auditing firm's office responsible for the private fund's audit (city, state and country):

   City: GRAND CAYMAN
   State: Country: Cayman Islands

   (d) Is the auditing firm an independent public accountant?

   Yes  No

   (e) Is the auditing firm registered with the Public Company Accounting Oversight Board?

   Yes  No

   If yes, Public Company Accounting Oversight Board-Assigned Number:

   248

   (f) If "yes" to (e) above, is the auditing firm subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?

   Yes  No

   (g) Are the private fund's audited financial statements for the most recently completed fiscal year distributed to the private fund's investors?

   Yes  No

   (h) Do all of the reports prepared by the auditing firm for the private fund since your last annual updating amendment contain unqualified opinions?

   Yes  No  Report Not Yet Received

   If you check "Report Not Yet Received," you must promptly file an amendment to your Form ADV to update your response when the report is available.

Prime Broker

24. (a) Does the private fund use one or more prime brokers?

   Yes  No

   If the answer to question 24.(a) is "yes," respond to questions (b) through (e) below for each prime broker the private fund uses. If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.

   No Information Filed

Custodian

25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets?

   Yes  No

   If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one...
### Additional Custodian Information : 1 Record(s) Filed.

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

<table>
<thead>
<tr>
<th>(b) Legal name of custodian:</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAPLESFS LIMITED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(c) Primary business name of custodian:</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAPLESFS LIMITED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):</th>
</tr>
</thead>
</table>
| City: GRAND CAYMAN  
State: Cayman Islands  
Yes  
No |

<table>
<thead>
<tr>
<th>(e) Is the custodian a related person of your firm?</th>
</tr>
</thead>
</table>
| ○ No  
○ Yes |

<table>
<thead>
<tr>
<th>(f) If the custodian is a broker-dealer, provide its SEC registration number (if any):</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRD Number (if any): -</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)</th>
</tr>
</thead>
</table>

### Administrator

26. (a) Does the private fund use an administrator other than your firm?

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

### Additional Administrator Information : 1 Record(s) Filed.

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

<table>
<thead>
<tr>
<th>(b) Name of administrator:</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAPLES FUND SERVICES (CAYMAN) LIMITED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(c) Location of administrator (city, state and country):</th>
</tr>
</thead>
</table>
| City: GRAND CAYMAN  
State: Cayman Islands  
Yes  
No |

<table>
<thead>
<tr>
<th>(d) Is the administrator a related person of your firm?</th>
</tr>
</thead>
</table>
| ○ No  
○ Yes |

<table>
<thead>
<tr>
<th>(e) Does the administrator prepare and send investor account statements to the private fund's investors?</th>
</tr>
</thead>
</table>
| ○ Yes (provided to all investors)  
○ Some (provided to some but not all investors)  
○ No (provided to no investors) |

<table>
<thead>
<tr>
<th>(f) If the answer to question 26.(e) is &quot;no&quot; or &quot;some,&quot; who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond &quot;not applicable.&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE APPLICABLE FUND.</td>
</tr>
</tbody>
</table>

27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person?

100%

Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.
A. PRIVATE FUND

Information About the Private Fund

1. (a) Name of the private fund:
   SAFANAD STUDENT HOUSING INVESTMENT PARTNERSHIP II, LP
   (b) Private fund identification number:
      (include the "805-") prefix also)
      805-5552077848

2. Under the laws of what state or country is the private fund organized:
   State: Delaware
   Country: United States

3. (a) Name(s) of General Partner, Manager, Trustee, or Directors (or persons serving in a similar capacity):
   Name of General Partner, Manager, Trustee, or Director
   SSHIP II GP, LLC

   (b) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund.
   Filing Adviser/Relying Adviser Name
   SSHIP II MANAGEMENT LLC

4. The private fund (check all that apply; you must check at least one):
   (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
   No Information Filed

6. (a) Is this a "master fund" in a master-feeder arrangement?
   (b) If yes, what is the name and private fund identification number (if any) of the feeder funds investing in this private fund?

   Name of feeder fund
   Private fund identification number
   SSHIP II HOLDCO LIMITED
   805-4352669068
   SSHIP II CAYMAN FEEDER, L.P.
   805-8115894343
   SSHIP II INVESTORS, LLC
   805-7377244746
   SSHIP II-1, INC.
   805-6072033393

   (c) Is this a "feeder fund" in a master-feeder arrangement?
   (d) If yes, what is the name and private fund identification number (if any) of the master fund in which this private fund invests?

   Name of master fund:
   Private fund identification number:
   (include the "805-") prefix also)

NOTE: You must complete question 6 for each master-feeder arrangement regardless of whether you are filing a single Schedule D, Section 7.B.(1) for the master-feeder arrangement or reporting on the funds separately.
### Additional Feeder Fund Information: 4 Record(s) Filed.

#### 7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

<table>
<thead>
<tr>
<th>(a) Name of the private fund:</th>
<th>SAFANAD SSSHIP II HOLDCO LIMITED</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Private fund identification number:</td>
<td>805-4352669068</td>
</tr>
<tr>
<td>(c) Under the laws of what state or country is the private fund organized:</td>
<td>State: Cayman Islands</td>
</tr>
</tbody>
</table>
| (d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity): | JOHN MARK BENN  
SHERWIN DARIUS JANNAT  
ZIAD DANNAOUI |
| (d) (2) Filing Adviser/Relying Adviser Name | SAFANAD MANAGEMENT LIMITED |
| (e) The private fund (check all that apply; you must check at least one): | ☑ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940  
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940 |
| (f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered: | No Information Filed |

#### 7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

<table>
<thead>
<tr>
<th>(a) Name of the private fund:</th>
<th>SSSHIP II CAYMAN FEEDER, L.P.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(b) Private fund identification number:</td>
<td>805-8115894343</td>
</tr>
<tr>
<td>(c) Under the laws of what state or country is the private fund organized:</td>
<td>State: Cayman Islands</td>
</tr>
<tr>
<td>(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):</td>
<td>SSSHIP II GP LIMITED</td>
</tr>
<tr>
<td>(d) (2) Filing Adviser/Relying Adviser Name</td>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:

SHIP II INVESTORS, LLC

(b) Private fund identification number:
(include the "805-" prefix also)
805-7377244746

(c) Under the laws of what state or country is the private fund organized:

State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

Name of General Partner, Manager, Trustee or Director

JOHN RUTLEDGE
SAFANAD PATRON INVESTORS 2 LIMITED
VINCENT THADDEUS PICA (II)

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

Filing Adviser/Relying Adviser Name
SAFANAD INC.

(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:

SHIP II-1, INC.

(b) Private fund identification number:
(include the "805-" prefix also)
805-607203393

(c) Under the laws of what state or country is the private fund organized:

State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

Name of General Partner, Manager, Trustee or Director

CHRISTOPHER AIKEN

No Information Filed
NOTE: For purposes of questions 6 and 7, in a master-feeder arrangement, one or more funds ("feeder funds") invest all or substantially all of their assets in a single fund ("master fund"). A fund would also be a "feeder fund" investing in a "master fund" for purposes of this question if it issued multiple classes (or series) of shares or interests, and each class (or series) invests substantially all of its assets in a single master fund.

8. (a) Is this private fund a "fund of funds"?
   Yes No
   
   NOTE: For purposes of this question only, answer "yes" if the fund invests 10 percent or more of its total assets in other pooled investment vehicles, regardless of whether they are also private funds or registered investment companies.

   (b) If yes, does the private fund invest in funds managed by you or by a related person?
      Yes No

9. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Company Act of 1940 (other than "money market funds," to the extent provided in Instruction 6.e.)?

10. What type of fund is the private fund?
    ☐ hedge fund ☐ liquidity fund ☐ private equity fund ☑ real estate fund ☐ securitized asset fund ☐ venture capital fund ☐ Other private fund:

    NOTE: For definitions of these fund types, please see Instruction 6 of the Instructions to Part 1A.

11. Current gross asset value of the private fund:
    $38,800,797

Ownership

12. Minimum investment commitment required of an investor in the private fund:
    $5,000,000

    NOTE: Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the private fund's beneficial owners:
    9

14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:
    62%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds:
    0%

    Yes No

   (b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:
    92%
17. (a) Are you a subadviser to this private fund?
(b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.

No Information Filed

(c) Under the laws of what state or country is the private fund organized:
State: Country: Cayman Islands

18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the private fund?
(b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.

No Information Filed

19. Are your clients solicited to invest in the private fund?
   NOTE: For purposes of this question, do not consider feeder funds of the private fund.

Yes No

20. Approximately what percentage of your clients has invested in the private fund?
   0%

Private Offering

21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933?

Yes No

22. If yes, provide the private fund's Form D file number (if any):

<table>
<thead>
<tr>
<th>Form D file number</th>
</tr>
</thead>
<tbody>
<tr>
<td>021-304003</td>
</tr>
</tbody>
</table>

B. SERVICE PROVIDERS

Auditors

23. (a) (1) Are the private fund's financial statements subject to an annual audit?
   (2) If the answer to question 23.(a)(1) is "yes," are the financial statements prepared in accordance with U.S. GAAP?
   If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

Additional Auditor Information : 1 Record(s) Filed.

If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

(b) Name of the auditing firm:
GRANT THORNTON

(c) The location of the auditing firm's office responsible for the private fund's audit (city, state and country):
   City: GRAND CAYMAN
   State: Country: Cayman Islands

(d) Is the auditing firm an independent public accountant?
Yes No

(e) Is the auditing firm registered with the Public Company Accounting Oversight Board?
Yes No

If yes, Public Company Accounting Oversight Board-Assigned Number:
248

(f) If "yes" to (e) above, is the auditing firm subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?
Yes No

(g) Are the private fund's audited financial statements for the most recently completed fiscal year distributed to the private fund's investors?
Yes No

(h) Do all of the reports prepared by the auditing firm for the private fund since your last annual updating amendment contain unqualified opinions?
Yes No Report Not Yet Received
Prime Broker

24. (a) Does the private fund use one or more prime brokers? 
   Yes No ☐  ☐
   If the answer to question 24.(a) is "yes," respond to questions (b) through (e) below for each prime broker the private fund uses. If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.

Custodian

25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets? 
   Yes No ☐  ☐
   If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

Additional Custodian Information : 1 Record(s) Filed.

   If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

   (b) Legal name of custodian: MAPLESFS LIMITED
   (c) Primary business name of custodian: MAPLESFS LIMITED
   (d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):
   City: GRAND CAYMAN  State: Country: Cayman Islands
   (e) Is the custodian a related person of your firm? Yes No ☐  ☐
   (f) If the custodian is a broker-dealer, provide its SEC registration number (if any):
   CRD Number (if any):
   (g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)

Administrator

26. (a) Does the private fund use an administrator other than your firm? 
   Yes No ☐  ☐
   If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

Additional Administrator Information : 1 Record(s) Filed.

   If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

   (b) Name of administrator: MAPLES FUND SERVICES (CAYMAN) LIMITED
   (c) Location of administrator (city, state and country):
   City: GRAND CAYMAN  State: Country: Cayman Islands
27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person?

100%

Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.

Marketers

28. (a) Does the private fund use the services of someone other than you or your employees for marketing purposes?

☐ Yes ☐ No

You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer to question 28.(a) is "yes," respond to questions (b) through (g) below for each such marketer the private fund uses. If the private fund uses more than one marketer you must complete questions (b) through (g) separately for each marketer.

A. PRIVATE FUND

Information About the Private Fund

1. (a) Name of the private fund:
   SAFANAD SUBURBAN OFFICE PARTNERSHIP, LP
   (b) Private fund identification number:
      (include the "805-" prefix also)
      805-5895179445

2. Under the laws of what state or country is the private fund organized:
   State: Delaware
   Country: United States

3. (a) Name(s) of General Partners, Manager, Trustee, or Directors (or persons serving in a similar capacity):

   Name of General Partner, Manager, Trustee, or Director
   SSOP GP, LLC

   (b) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund.

   Filing Adviser/Relying Adviser Name
   SSOP MANAGEMENT LLC

4. The private fund (check all that apply; you must check at least one):
   ☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   ☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

5. List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

   No Information Filed

6. (a) Is this a "master fund" in a master-feeder arrangement?

   ☑ Yes ☐ No

   (b) If yes, what is the name and private fund identification number (if any) of the feeder funds investing in this private fund?

   Name of private fund
   Private fund identification number
   No Information Filed
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

**Additional Feeder Fund Information : 11 Record(s) Filed.**

(a) Name of the private fund:
SSOP EQUITY I LIMITED

(b) Private fund identification number:
(include the "805-" prefix also)
805-2000449798

(c) Under the laws of what state or country is the private fund organized:
State: Country:
Cayman Islands

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
</tr>
<tr>
<td>SHERWIN DARIUS JANNAT</td>
</tr>
<tr>
<td>ZIAD MOHAMAD HUSSEIN DANNAOUI</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):
- (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered:

<table>
<thead>
<tr>
<th>Name of Country/English Name of Foreign Financial Regulatory Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cayman Islands - Cayman Islands Monetary Authority</td>
</tr>
</tbody>
</table>
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
   SSOP EQUITY II LIMITED

(b) Private fund identification number:
   (include the "805-*" prefix also)
   805-6297306946

(c) Under the laws of what state or country is the private fund organized:
   State: Country:
   Cayman Islands

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
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</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

- _☐_ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- _☑_ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

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</tbody>
</table>
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSOP EQUITY IV LIMITED

(b) Private fund identification number:
(include the "805-" prefix also)
805-7852031893

(c) Under the laws of what state or country is the private fund organized:
State: Country: Cayman Islands

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
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</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD MANAGEMENT LIMITED</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

- [ ] (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- [X] (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

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<th>Name of Country/English Name of Foreign Financial Regulatory Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cayman Islands - Cayman Islands Monetary Authority</td>
</tr>
</tbody>
</table>
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
   SSOP INVESTORS, LLC

(b) Private fund identification number:
   (include the "805-" prefix also)
   805-8298777781

(c) Under the laws of what state or country is the private fund organized:
   
   State: Delaware
   Country: United States

(d) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):
   
   JOHN RUTLEDGE
   SAFANAD PATRON INVESTORS 1 LIMITED
   VINCENT THADDEUS PICA (II)

(e) The private fund (check all that apply; you must check at least one):
   
   ☑ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
   ☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
   No Information Filed
(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

Name of General Partner, Manager, Trustee or Director

SSOP GP, LLC

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

Filing Adviser/Relying Adviser Name

SSOP MANAGEMENT LLC

(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940

☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:

SSOP-I, INC.

(b) Private fund identification number:

(include the "805-" prefix also)

805-4709294915

(c) Under the laws of what state or country is the private fund organized:

State: Country:

Delaware United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

Name of General Partner, Manager, Trustee or Director

JOHN MARK BENN
SHERWIN DARIUS JANNAT
VINCENT THADDEUS PICA (II)

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

Filing Adviser/Relying Adviser Name

SAFANAD INC.

(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940

☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

No Information Filed

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:

SSOP-II, INC.

(b) Private fund identification number:

(include the "805-" prefix also)

805-9572658377
7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSOP-III, INC.

(b) Private fund identification number:
(include the "805-" prefix also)
805-89880794029

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

(d) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
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</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
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</tr>
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</table>

(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed

7. If you are filing a single Schedule D, Section 7.B.(1) for a master-feeder arrangement according to the instructions to this Section 7.B.(1), for each of the feeder funds answer the following questions:

(a) Name of the private fund:
SSOP-III, INC.

(b) Private fund identification number:
(include the "805-" prefix also)
805-89880794029

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

(d) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
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</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):

☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
☐ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.
No Information Filed
(a) Name of the private fund:
SSOP-IV, INC.

(b) Private fund identification number:
(include the “805-” prefix also)
805-9151856214

(c) Under the laws of what state or country is the private fund organized:
State: Delaware
Country: United States

(d) (1) Name(s) of General Partner, Manager, Trustee or Directors (or persons serving in a similar capacity):

<table>
<thead>
<tr>
<th>Name of General Partner, Manager, Trustee or Director</th>
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</thead>
<tbody>
<tr>
<td>JOHN MARK BENN</td>
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<td>SHERWIN DARIUS JANNAT</td>
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<td>VINCENT THADDEUS PICA (II)</td>
</tr>
</tbody>
</table>

(d) (2) If filing an umbrella registration, identify the filing adviser and/or relying adviser(s) that sponsor(s) or manage(s) this private fund:

<table>
<thead>
<tr>
<th>Filing Adviser/Relying Adviser Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD INC.</td>
</tr>
</tbody>
</table>

(e) The private fund (check all that apply; you must check at least one):
- ☐ (1) qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940
- ☑ (2) qualifies for the exclusion from the definition of investment company under section 3(c)(7) of the Investment Company Act of 1940

(f) List the name and country, in English, of each foreign financial regulatory authority with which the private fund is registered.

<table>
<thead>
<tr>
<th>Name of Country/English Name of Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Information Filed</td>
</tr>
</tbody>
</table>

NOTE: For purposes of questions 6 and 7, in a master-feeder arrangement, one or more funds (“feeder funds”) invest all or substantially all of their assets in a single fund (“master fund”). A fund would also be a “feeder fund” investing in a “master fund” for purposes of this question if it issued multiple classes (or series) of shares or interests, and each class (or series) invests substantially all of its assets in a single master fund.

8. (a) Is this private fund a “fund of funds”?
YES ☑ NO ☐

NOTE: For purposes of this question only, answer “yes” if the fund invests 10 percent or more of its total assets in other pooled investment vehicles, regardless of whether they are also private funds or registered investment companies.

(b) If yes, does the private fund invest in funds managed by you or by a related person?
YES ☐ NO ☑

9. During your last fiscal year, did the private fund invest in securities issued by investment companies registered under the Investment Company Act of 1940 (other than “money market funds,” to the extent provided in Instruction 6.e.)?

10. What type of fund is the private fund?
- ☐ hedge fund ☐ liquidity fund ☐ private equity fund ☑ real estate fund ☐ securitized asset fund ☐ venture capital fund ☐ Other private fund:

NOTE: For definitions of these fund types, please see Instruction 6 of the Instructions to Part 1A.

11. Current gross asset value of the private fund:
$ 164,794,519

Ownership

12. Minimum investment commitment required of an investor in the private fund:
$ 5,000,000

NOTE: Report the amount routinely required of investors who are not your related persons (even if different from the amount set forth in the organizational documents of the fund).

13. Approximate number of the private fund's beneficial owners:
29

NOTE: For purposes of this question, assets held in a trust or similar arrangement for the benefit of beneficiaries are considered to be held in a single account.

Additional Administrator Information : 1 Record(s) Filed.

Additional Custodian Information : 1 Record(s) Filed.
14. What is the approximate percentage of the private fund beneficially owned by you and your related persons:
   36%

15. (a) What is the approximate percentage of the private fund beneficially owned (in the aggregate) by funds of funds:
   0%
   Yes No
   (b) If the private fund qualifies for the exclusion from the definition of investment company under section 3(c)(1) of the Investment Company Act of 1940, are sales of the fund limited to qualified clients?

16. What is the approximate percentage of the private fund beneficially owned by non-United States persons:
   86%

Your Advisory Services

17. (a) Are you a subadviser to this private fund?
   Yes No
   (b) If the answer to question 17.(a) is "yes," provide the name and SEC file number, if any, of the adviser of the private fund. If the answer to question 17.(a) is "no," leave this question blank.

   No Information Filed

18. (a) Do any investment advisers (other than the investment advisers listed in Section 7.B.(1).A.3.(b)) advise the private fund?
   Yes No
   (b) If the answer to question 18.(a) is "yes," provide the name and SEC file number, if any, of the other advisers to the private fund. If the answer to question 18.(a) is "no," leave this question blank.

   No Information Filed

19. Are your clients solicited to invest in the private fund?
   Yes No
   NOTE: For purposes of this question, do not consider feeder funds of the private fund.

20. Approximately what percentage of your clients has invested in the private fund?
   0%

Private Offering

21. Has the private fund ever relied on an exemption from registration of its securities under Regulation D of the Securities Act of 1933?
   Yes No

22. If yes, provide the private fund's Form D file number (if any):

   Form D file number
   021-272737

B. SERVICE PROVIDERS

Auditors

23. (a) (1) Are the private fund's financial statements subject to an annual audit?
   Yes No
   (2) If the answer to question 23.(a)(1) is "yes," are the financial statements prepared in accordance with U.S. GAAP?
   Yes No
   If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

   Additional Auditor Information: 1 Record(s)Filed.
   If the answer to question 23.(a)(1) is "yes," respond to questions (b) through (h) below. If the private fund uses more than one auditing firm, you must complete questions (b) through (f) separately for each auditing firm.

   (b) Name of the auditing firm:
       GRANT THORNTON

   (c) The location of the auditing firm's office responsible for the private fund's audit (city, state and country):
       City: GRAND CAYMAN
       State: Cayman Islands
(d) Is the auditing firm an independent public accountant?
  - Yes  No

(e) Is the auditing firm registered with the Public Company Accounting Oversight Board?
  - Yes  No

If yes, Public Company Accounting Oversight Board-Assigned Number:
248

(f) If "yes" to (e) above, is the auditing firm subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?
  - Yes  No

(g) Are the private fund's audited financial statements for the most recently completed fiscal year distributed to the private fund's investors?
  - Yes  No

(h) Do all of the reports prepared by the auditing firm for the private fund since your last annual updating amendment contain unqualified opinions?
  - Yes  No Report Not Received

- If you check "Report Not Yet Received," you must promptly file an amendment to your Form ADV to update your response when the report is available.

Prime Broker

24. (a) Does the private fund use one or more prime brokers?
  - Yes  No

If the answer to question 24.(a) is "yes," respond to questions (b) through (e) below for each prime broker the private fund uses. If the private fund uses more than one prime broker, you must complete questions (b) through (e) separately for each prime broker.

No Information Filed

Custodian

25. (a) Does the private fund use any custodians (including the prime brokers listed above) to hold some or all of its assets?
  - Yes  No

If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

Additional Custodian Information : 1 Record(s) Filed.

- If the answer to question 25.(a) is "yes," respond to questions (b) through (g) below for each custodian the private fund uses. If the private fund uses more than one custodian, you must complete questions (b) through (g) separately for each custodian.

(b) Legal name of custodian:
  MAPLESFS LIMITED

(c) Primary business name of custodian:
  MAPLESFS LIMITED

(d) The location of the custodian's office responsible for custody of the private fund's assets (city, state and country):
  City: GRAND CAYMAN
  State: Country: Cayman Islands

(e) Is the custodian a related person of your firm?
  - Yes  No

(f) If the custodian is a broker-dealer, provide its SEC registration number (if any):
  - CRD Number (if any):

(g) If the custodian is not a broker-dealer, or is a broker-dealer but does not have an SEC registration number, provide its legal entity identifier (if any)

Administrator

26. (a) Does the private fund use an administrator other than your firm?
  - Yes  No
If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

**Additional Administrator Information : 1 Record(s) Filed.**

If the answer to question 26.(a) is "yes," respond to questions (b) through (f) below. If the private fund uses more than one administrator, you must complete questions (b) through (f) separately for each administrator.

(b) Name of administrator:
MAPLES FUND SERVICES (CAYMAN) LIMITED

(c) Location of administrator (city, state and country):
City: GRAND CAYMAN
State: Country: Cayman Islands

(d) Is the administrator a related person of your firm?

(e) Does the administrator prepare and send investor account statements to the private fund's investors?
- Yes (provided to all investors)
- Some (provided to some but not all investors)
- No (provided to no investors)

(f) If the answer to question 26.(e) is "no" or "some," who sends the investor account statements to the (rest of the) private fund's investors? If investor account statements are not sent to the (rest of the) private fund's investors, respond "not applicable."

THE APPLICABLE FUND.

27. During your last fiscal year, what percentage of the private fund's assets (by value) was valued by a person, such as an administrator, that is not your related person? 100%

Include only those assets where (i) such person carried out the valuation procedure established for that asset, if any, including obtaining any relevant quotes, and (ii) the valuation used for purposes of investor subscriptions, redemptions or distributions, and fee calculations (including allocations) was the valuation determined by such person.

**Marketers**

28. (a) Does the private fund use the services of someone other than you or your employees for marketing purposes?

You must answer "yes" whether the person acts as a placement agent, consultant, finder, introducer, municipal advisor or other solicitor, or similar person. If the answer to question 28.(a) is "yes," respond to questions (b) through (g) below for each such marketer the private fund uses. If the private fund uses more than one marketer you must complete questions (b) through (g) separately for each marketer.

**No Information Filed**

**Funds per Page: 15 Total Funds: 12**

**SECTION 7.B.(2) Private Fund Reporting**

**No Information Filed**

**Item 8 Participation or Interest in Client Transactions**

In this item, we request information about your participation and interest in your clients' transactions. This information identifies additional areas in which conflicts of interest may occur between you and your clients. Newly-formed advisers should base responses to these questions on the types of participation and interest that you expect to engage in during the next year.

Like Item 7, Item 8 requires you to provide information about you and your related persons, including foreign affiliates.

**Proprietary Interest in Client Transactions**

A. Do you or any related person:

1. buy securities for yourself from advisory clients, or sell securities you own to advisory clients (principal transactions)?
2. buy or sell for yourself securities (other than shares of mutual funds) that you also recommend to advisory clients?
3. recommend securities (or other investment products) to advisory clients in which you or any related person has some other proprietary (ownership) interest (other than those mentioned in Items 8.A.(1) or (2))? 

**Yes No**
### Sales Interest in Client Transactions

**B. Do you or any related person:**

1. as a broker-dealer or registered representative of a broker-dealer, execute securities trades for brokerage customers in which advisory client securities are sold to or bought from the brokerage customer (agency cross transactions)?

2. recommend to advisory clients, or act as a purchaser representative for advisory clients with respect to, the purchase of securities for which you or any related person serves as underwriter or general or managing partner?

3. recommend purchase or sale of securities to advisory clients for which you or any related person has any other sales interest (other than the receipt of sales commissions as a broker or registered representative of a broker-dealer)?

---

### Investment or Brokerage Discretion

**C. Do you or any related person have discretionary authority to determine the:**

1. securities to be bought or sold for a client's account?

2. amount of securities to be bought or sold for a client's account?

3. broker or dealer to be used for a purchase or sale of securities for a client's account?

4. commission rates to be paid to a broker or dealer for a client's securities transactions?

**D. If you answer "yes" to C.(3) above, are any of the brokers or dealers related persons?**

**E. Do you or any related person recommend brokers or dealers to clients?**

**F. If you answer "yes" to E. above, are any of the brokers or dealers related persons?**

**G. (1) Do you or any related person receive research or other products or services other than execution from a broker-dealer or a third party ("soft dollar benefits") in connection with client securities transactions?**

**G. (2) If "yes" to G.1 above, are all the "soft dollar benefits" you or any related persons receive eligible "research or brokerage services" under section 28(e) of the Securities Exchange Act of 1934?**

**H. (1) Do you or any related person, directly or indirectly, compensate any person that is not an employee for client referrals?**

**H. (2) Do you or any related person, directly or indirectly, provide any employee compensation that is specifically related to obtaining clients for the firm (cash or non-cash compensation in addition to the employee's regular salary)?**

**I. Do you or any related person, including any employee, directly or indirectly, receive compensation from any person (other than you or any related person) for client referrals?**

*In your response to Item 8.I., do not include the regular salary you pay to an employee.*

*In responding to Items 8.H. and 8.I., consider all cash and non-cash compensation that you or a related person gave to (in answering Item 8.H.) or received from (in answering Item 8.I.) any person in exchange for client referrals, including any bonus that is based, at least in part, on the number or amount of client referrals.*

---

### Item 9 Custody

In this Item, we ask whether you or a related person has custody of client (other than clients that are investment companies registered under the Investment Company Act of 1940) assets and about your custodial practices.

**A. (1) Do you have custody of any advisory clients':**

   a. cash or bank accounts?

   b. securities?

*If you are registering or registered with the SEC, answer "No" to Item 9.A.(1)(a) and (b) if you have custody solely because (i) you deduct your advisory fees directly from your clients' accounts, or (ii) a related person has custody of client assets in connection with advisory services you provide to clients, but you have overcome the presumption that you are not operationally independent (pursuant to Advisers Act rule 206(4)-2(d)(5)) from the related person.*

**A. (2) If you checked "yes" to Item 9.A.(1)(a) or (b), what is the approximate amount of client funds and securities and total number of clients for which you have custody:**

<table>
<thead>
<tr>
<th>U.S. Dollar Amount</th>
<th>Total Number of Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,272,528,562</td>
<td>88</td>
</tr>
</tbody>
</table>

*If you are registering or registered with the SEC and you have custody solely because you deduct your advisory fees directly from your clients' accounts, do not include the amount of those assets and the number of those clients in your response to Item 9.A.(2). If your related person has custody of client assets in connection with advisory services you provide to clients, do not include the amount of those assets and number of those clients in your response to 9.A.(2). Instead, include that information in your response to Item 9.B.(2).*

**B. (1) In connection with advisory services you provide to clients, do any of your related persons have custody of any of your advisory clients':**

   a. cash or bank accounts?

   b. securities?
You are required to answer this item regardless of how you answered Item 9.A.(1)(a) or (b).

(2) If you checked "yes" to Item 9.B.(1)(a) or (b), what is the approximate amount of client funds and securities and total number of clients for which your related persons have custody:

<table>
<thead>
<tr>
<th>U.S. Dollar Amount</th>
<th>Total Number of Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) $ 1,272,528,562</td>
<td>(b) 88</td>
</tr>
</tbody>
</table>

C. If you or your related persons have custody of client funds or securities in connection with advisory services you provide to clients, check all the following that apply:

1. A qualified custodian(s) sends account statements at least quarterly to the investors in the pooled investment vehicle(s) you manage.
2. An independent public accountant audits annually the pooled investment vehicle(s) that you manage and the audited financial statements are distributed to the investors in the pools.
3. An independent public accountant conducts an annual surprise examination of client funds and securities.
4. An independent public accountant prepares an internal control report with respect to custodial services when you or your related persons are qualified custodians for client funds and securities.

If you checked Item 9.C.(2), C.(3) or C.(4), list in Section 9.C. of Schedule D the accountants that are engaged to perform the audit or examination or prepare an internal control report. (If you checked Item 9.C.(2), you do not have to list auditor information in Section 9.C. of Schedule D if you already provided this information with respect to the private funds you advise in Section 7.B.(1) of Schedule D).

D. Do you or your related person(s) act as qualified custodians for your clients in connection with advisory services you provide to clients?

Yes  No
(1) you act as a qualified custodian
(2) your related person(s) act as qualified custodian(s)

If you checked "yes" to Item 9.D.(2), all related persons that act as qualified custodians (other than any mutual fund transfer agent pursuant to rule 206(4)-2(b)(1)) must be identified in Section 7.A. of Schedule D, regardless of whether you have determined the related person to be operationally independent under rule 206(4)-2 of the Advisers Act.

E. If you are filing your annual updating amendment and you were subject to a surprise examination by an independent public accountant during your last fiscal year, provide the date (MM/YYYY) the examination commenced:

06/2020

F. If you or your related persons have custody of client funds or securities, how many persons, including, but not limited to, you and your related persons, act as qualified custodians for your clients in connection with advisory services you provide to clients?

5

SECTION 9.C. Independent Public Accountant

You must complete the following information for each independent public accountant engaged to perform a surprise examination, perform an audit of a pooled investment vehicle that you manage, or prepare an internal control report. You must complete a separate Schedule D Section 9.C. for each independent public accountant.

(1) Name of the independent public accountant:

BDO USA, LLP

(2) The location of the independent public accountant's office responsible for the services provided:

<table>
<thead>
<tr>
<th>Number and Street 1</th>
<th>Number and Street 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>330 E KILBURN AVENUE, SUITE 950</td>
<td>TWO PLAZA EAST</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Country</th>
<th>ZIP+4/Postal Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>MILWAUKEE</td>
<td>Wisconsin</td>
<td>United States</td>
<td>53202-3143</td>
</tr>
</tbody>
</table>

Yes  No

(3) Is the independent public accountant registered with the Public Company Accounting Oversight Board?

If "yes," Public Company Accounting Oversight Board-Assigned Number:

243

(4) If "yes" to (3) above, is the independent public accountant subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?

Yes  No

(5) The independent public accountant is engaged to:

A. ☑ audit a pooled investment vehicle
B. ☑ perform a surprise examination of clients' assets
C. ☑ prepare an internal control report

(6) Since your last annual updating amendment, did all of the reports prepared by the independent public accountant that audited the pooled investment vehicle or that examined internal controls contain unqualified opinions?

Yes  No
If you answer "yes" to C.(3) above, are any of the brokers or dealers related persons?

Yes

If you answer "yes" to E. above, are any of the brokers or dealers related persons?

Yes

Name of the independent public accountant:

DELOITTE & TOUCHE, LLP

The location of the independent public accountant’s office responsible for the services provided:

Number and Street 1: 191 PEACHTREE STREET NE

City: ATLANTA

State: Georgia

Country: United States

ZIP+4/Postal Code: 30303-1943

Is the independent public accountant registered with the Public Company Accounting Oversight Board?

Yes

If "yes," Public Company Accounting Oversight Board-Assigned Number:

34

If "yes" to (3) above, is the independent public accountant subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?

Yes

The independent public accountant is engaged to:

A. audit a pooled investment vehicle
B. perform a surprise examination of clients’ assets
C. prepare an internal control report

Since your last annual updating amendment, did all of the reports prepared by the independent public accountant that audited the pooled investment vehicle or that examined internal controls contain unqualified opinions?

Yes

Report Not Yet Received

If you check "Report Not Yet Received", you must promptly file an amendment to your Form ADV to update your response when the accountant’s report is available.

Name of the independent public accountant:

FRAZIER & DEETER, LLC

The location of the independent public accountant’s office responsible for the services provided:

Number and Street 1: 1230 PEACHTREE STREET, NE

City: ATLANTA

State: Georgia

Country: United States

ZIP+4/Postal Code: 30309

Is the independent public accountant registered with the Public Company Accounting Oversight Board?

Yes

If "yes," Public Company Accounting Oversight Board-Assigned Number:

215

If "yes" to (3) above, is the independent public accountant subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?

Yes

The independent public accountant is engaged to:

A. audit a pooled investment vehicle
B. perform a surprise examination of clients’ assets
C. prepare an internal control report

Since your last annual updating amendment, did all of the reports prepared by the independent public accountant that audited the pooled investment vehicle or that examined internal controls contain unqualified opinions?

Yes
(1) Name of the independent public accountant:
GRANT THORNTON

(2) The location of the independent public accountant's office responsible for the services provided:
Number and Street 1: Number and Street 2:
171 ELGIN AVENUE
City: State: Country: ZIP+4/Postal Code:
GRAND CAYMAN Cayman Islands

(3) Is the independent public accountant registered with the Public Company Accounting Oversight Board?

If "yes," Public Company Accounting Oversight Board-Assigned Number:
248

(4) If "yes" to (3) above, is the independent public accountant subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?

(5) The independent public accountant is engaged to:
A. ☑️ audit a pooled investment vehicle
B. ☑️ perform a surprise examination of clients' assets
C. ☐ prepare an internal control report

(6) Since your last annual updating amendment, did all of the reports prepared by the independent public accountant that audited the pooled investment vehicle or that examined internal controls contain unqualified opinions?

☐ Yes
☐ No
☐ Report Not Yet Received

If you check "Report Not Yet Received", you must promptly file an amendment to your Form ADV to update your response when the accountant's report is available.

---

(1) Name of the independent public accountant:
KP
g

(2) The location of the independent public accountant's office responsible for the services provided:
Number and Street 1: Number and Street 2:
SIX CRICKET SQUARE
City: State: Country: ZIP+4/Postal Code:
GRAND CAYMAN Cayman Islands KY1-1106

(3) Is the independent public accountant registered with the Public Company Accounting Oversight Board?

If "yes," Public Company Accounting Oversight Board-Assigned Number:
185

(4) If "yes" to (3) above, is the independent public accountant subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?

(5) The independent public accountant is engaged to:
A. ☑️ audit a pooled investment vehicle
B. ☑️ perform a surprise examination of clients' assets
C. ☐ prepare an internal control report

(6) Since your last annual updating amendment, did all of the reports prepared by the independent public accountant that audited the pooled investment vehicle or that examined internal controls contain unqualified opinions?

☐ Yes
☐ No
☐ Report Not Yet Received

If you check "Report Not Yet Received", you must promptly file an amendment to your Form ADV to update your response when the accountant's report is available.
(1) Name of the independent public accountant:
MAZARS USA LLP

(2) The location of the independent public accountant's office responsible for the services provided:
Number and Street 1:
135 WEST 50TH STREET
City: NEW YORK State: New York
Country: United States
ZIP+4/Postal Code: 10020

(3) Is the independent public accountant registered with the Public Company Accounting Oversight Board?

Yes ☐ No ☐
If "yes," Public Company Accounting Oversight Board-Assigned Number:
339

(4) If "yes" to (3) above, is the independent public accountant subject to regular inspection by the Public Company Accounting Oversight Board in accordance with its rules?

Yes ☐ No ☐

(5) The independent public accountant is engaged to:
A. ☐ audit a pooled investment vehicle
B. ☐ perform a surprise examination of clients' assets
C. ☐ prepare an internal control report

(6) Since your last annual updating amendment, did all of the reports prepared by the independent public accountant that audited the pooled investment vehicle or that examined internal controls contain unqualified opinions?

Yes ☐ No ☐ Report Not Yet Received

If you check "Report Not Yet Received", you must promptly file an amendment to your Form ADV to update your response when the accountant's report is available.

Item 10 Control Persons
In this Item, we ask you to identify every person that, directly or indirectly, controls you. If you are filing an umbrella registration, the information in Item 10 should be provided for the filing adviser only.

If you are submitting an initial application or report, you must complete Schedule A and Schedule B. Schedule A asks for information about your direct owners and executive officers. Schedule B asks for information about your indirect owners. If this is an amendment and you are updating information you reported on either Schedule A or Schedule B (or both) that you filed with your initial application or report, you must complete Schedule C.

A. Does any person not named in Item 1.A. or Schedules A, B, or C, directly or indirectly, control your management or policies?

Yes ☐ No ☐

If yes, complete Section 10.A. of Schedule D.

B. If any person named in Schedules A, B, or C or in Section 10.A. of Schedule D is a public reporting company under Sections 12 or 15(d) of the Securities Exchange Act of 1934, please complete Section 10.B. of Schedule D.

SECTION 10.A. Control Persons
You must complete a separate Schedule D Section 10.A. for each control person not named in Item 1.A. or Schedules A, B, or C that directly or indirectly controls your management or policies.

Individual Name (if applicable) (Last, First, Middle)
ABU ALNASR, ABDULKAREEM

CRD Number (if any)
6917944

Effective Date 01/18/2015
Termination Date
<table>
<thead>
<tr>
<th>Business Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number and Street 1</td>
</tr>
<tr>
<td>PO BOX 506704</td>
</tr>
<tr>
<td>City</td>
</tr>
<tr>
<td>DUBAI</td>
</tr>
</tbody>
</table>

If this address is a private residence, check this box: [ ]

Briefly describe the nature of the control:

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED (WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC.).

You must complete a separate Schedule D Section 10.A. for each control person not named in Item 1.A. or Schedules A, B, or C that directly or indirectly controls your management or policies.

Individual Name (if applicable) (Last, First, Middle)
AL OLAYAN, LUBNA, SULIMAN

CRD Number (if any)
7049129

Effective Date | Termination Date
11/09/2018 |

Business Address:
Number and Street 1 | Number and Street 2
LEVEL 4, THE GATE (EAST) | PO BOX 506704, DIFC
City | State | Country | ZIP+4/Postal Code |
DUBAI | | United Arab Emirates | |

If this address is a private residence, check this box: [ ]

Briefly describe the nature of the control:

MS. LUBNA OLAYAN IS A DIRECTOR OF SAFANAD LIMITED (WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC.).

You must complete a separate Schedule D Section 10.A. for each control person not named in Item 1.A. or Schedules A, B, or C that directly or indirectly controls your management or policies.

Individual Name (if applicable) (Last, First, Middle)
BAHAMDAN, ABDULLAH, SALEM

CRD Number (if any)
6917937

Effective Date | Termination Date
07/23/2009 |

Business Address:
Number and Street 1 | Number and Street 2
ZONE C2 BLDG #C27 | P.O. BOX 43121
City | State | Country | ZIP+4/Postal Code |
RIYADH | | Saudi Arabia | 11561 |

If this address is a private residence, check this box: [ ]

Briefly describe the nature of the control:

ABDULLAH BAHAMDAN IS CHAIRMAN OF THE SAFANAD LIMITED BOARD OF DIRECTORS.

SECTION 10.B. Control Person Public Reporting Companies

No Information Filed
In this Item, we ask for information about your disciplinary history and the disciplinary history of all your advisory affiliates. We use this information to determine whether to grant your application for registration, to decide whether to revoke your registration or to place limitations on your activities as an investment adviser, and to identify potential problem areas to focus on during our on-site examinations. One event may result in "yes" answers to more than one of the questions below. In accordance with General Instruction 5 to Form ADV, "you" and "your" include the filing adviser and all relying advisers under an umbrella registration.

Your advisory affiliates are: (1) all of your current employees (other than employees performing only clerical, administrative, support or similar functions); (2) all of your officers, partners, or directors (or any person performing similar functions); and (3) all persons directly or indirectly controlling you or controlled by you. If you are a "separately identifiable department or division" (SID) of a bank, see the Glossary of Terms to determine who your advisory affiliates are.

If you are registered or registering with the SEC or if you are an exempt reporting adviser, you may limit your disclosure of any event listed in Item 11 to ten years following the date of the event. If you are registered or registering with a state, you must respond to the questions as posed; you may, therefore, limit your disclosure to ten years following the date of an event only in responding to Items 11.A.(1), 11.A.(2), 11.B.(1), 11.B.(2), 11.D.(4), and 11.H.(1)(a). For purposes of calculating this ten-year period, the date of an event is the date the final order, judgment, or decree was entered, or the date any rights of appeal from preliminary orders, judgments, or decrees lapsed.

You must complete the appropriate Disclosure Reporting Page ("DRP") for "yes" answers to the questions in this Item 11.

Do any of the events below involve you or any of your supervised persons?

Yes  No

For "yes" answers to the following questions, complete a Criminal Action DRP:

A. In the past ten years, have you or any advisory affiliate:

   (1) been convicted of or plead guilty to no contest in a domestic, foreign, or military court to any felony?
   Yes  No

   (2) been charged with any felony?
   Yes  No

If you are registered or registering with the SEC, or if you are reporting as an exempt reporting adviser, you may limit your response to Item 11.A.(2) to charges that are currently pending.

B. In the past ten years, have you or any advisory affiliate:

   (1) been convicted of or plead guilty to no contest in a domestic, foreign, or military court to a misdemeanor involving: investments or an investment-related business, or any fraud, false statements, or omissions, wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?
   Yes  No

   (2) been charged with a misdemeanor listed in Item 11.B.(1)?
   Yes  No

If you are registered or registering with the SEC, or if you are reporting as an exempt reporting adviser, you may limit your response to Item 11.B.(2) to charges that are currently pending.

For "yes" answers to the following questions, complete a Regulatory Action DRP:

C. Has the SEC or the Commodity Futures Trading Commission (CFTC) ever:

   (1) found you or any advisory affiliate to have made a false statement or omission?
   Yes  No

   (2) found you or any advisory affiliate to have been involved in a violation of SEC or CFTC regulations or statutes?
   Yes  No

   (3) found you or any advisory affiliate to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?
   Yes  No

   (4) entered an order against you or any advisory affiliate in connection with investment-related activity?
   Yes  No

   (5) imposed a civil money penalty on you or any advisory affiliate, or ordered you or any advisory affiliate to cease and desist from any activity?
   Yes  No

D. Has any other federal regulatory agency, any state regulatory agency, or any foreign financial regulatory authority:

   (1) ever found you or any advisory affiliate to have made a false statement or omission, or been dishonest, unfair, or unethical?
   Yes  No

   (2) ever found you or any advisory affiliate to have been involved in a violation of investment-related regulations or statutes?
   Yes  No

   (3) ever found you or any advisory affiliate to have been a cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?
   Yes  No

   (4) in the past ten years, entered an order against you or any advisory affiliate in connection with an investment-related activity?
   Yes  No

   (5) ever denied, suspended, or revoked your or any advisory affiliate's registration or license, or otherwise prevented you or any advisory affiliate, by order, from associating with an investment-related business or restricted your or any advisory affiliate's activity?
   Yes  No

E. Has any self-regulatory organization or commodities exchange ever:

   (1) found you or any advisory affiliate to have made a false statement or omission?
   Yes  No

   (2) found you or any advisory affiliate to have been involved in a violation of its rules (other than a violation designated as a "minor rule violation" under a plan approved by the SEC)?
   Yes  No

   (3) found you or any advisory affiliate to have been the cause of an investment-related business having its authorization to do business denied, suspended, revoked, or restricted?
   Yes  No

   (4) disciplined you or any advisory affiliate by expelling or suspending you or the advisory affiliate from membership, barring or suspending you or the advisory affiliate from association with other members, or otherwise restricting your or the advisory affiliate's activities?
   Yes  No

F. Has an authorization to act as an attorney, accountant, or federal contractor granted to you or any advisory affiliate ever been revoked or suspended?

Yes  No
For "yes" answers to the following questions, complete a Civil Judicial Action DRP:

H. (1) Has any domestic or foreign court:
   (a) in the past ten years, enjoined you or any advisory affiliate in connection with any investment-related activity?
   (b) ever found that you or any advisory affiliate were involved in a violation of investment-related statutes or regulations?
   (c) ever dismissed, pursuant to a settlement agreement, an investment-related civil action brought against you or any advisory affiliate by a state or foreign financial regulatory authority?
(2) Are you or any advisory affiliate now the subject of any civil proceeding that could result in a "yes" answer to any part of Item 11.H.(1)?

Item 12 Small Businesses

The SEC is required by the Regulatory Flexibility Act to consider the effect of its regulations on small entities. In order to do this, we need to determine whether you meet the definition of "small business" or "small organization" under rule 0-7.

Answer this Item 12 only if you are registered or registering with the SEC and you indicated in response to Item 5.F.(2)(c) that you have regulatory assets under management of less than $25 million. You are not required to answer this Item 12 if you are filing for initial registration as a state adviser, amending a current state registration, or switching from SEC to state registration.

For purposes of this Item 12 only:
- Total Assets refers to the total assets of a firm, rather than the assets managed on behalf of clients. In determining your or another person's total assets, you may use the total assets shown on a current balance sheet (but use total assets reported on a consolidated balance sheet with subsidiaries included, if that amount is larger).
- Control means the power to direct or cause the direction of the management or policies of a person, whether through ownership of securities, by contract, or otherwise.
- Any person that directly or indirectly has the right to vote 25 percent or more of the voting securities, or is entitled to 25 percent or more of the profits, of another person is presumed to control the other person.

A. Did you have total assets of $5 million or more on the last day of your most recent fiscal year?
   If "yes," you do not need to answer Items 12.B. and 12.C.

B. Do you:
   (1) control another investment adviser that had regulatory assets under management (calculated in response to Item 5.F.(2)(c) of Form ADV) of $25 million or more on the last day of its most recent fiscal year?
   (2) control another person (other than a natural person) that had total assets of $5 million or more on the last day of its most recent fiscal year?

C. Are you:
   (1) controlled by or under common control with another investment adviser that had regulatory assets under management (calculated in response to Item 5.F.(2)(c) of Form ADV) of $25 million or more on the last day of its most recent fiscal year?
   (2) controlled by or under common control with another person (other than a natural person) that had total assets of $5 million or more on the last day of its most recent fiscal year?

Schedule A

Direct Owners and Executive Officers

1. Complete Schedule A only if you are submitting an initial application or report. Schedule A asks for information about your direct owners and executive officers. Use Schedule C to amend this information.
2. Direct Owners and Executive Officers. List below the names of:
   (a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, Chief Compliance Officer (Chief Compliance Officer is required if you are registered or applying for registration and cannot be more than one individual), director, and any other individuals with similar status or functions;
   (b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);
   (c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;
   (d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and
   (e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.
3. Do you have any indirect owners to be reported on Schedule B? Yes No

4. In the DE/FEI column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.
5. Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).
6. Ownership codes are: NA - less than 5% B - 10% but less than 25% D - 50% but less than 75%
7. (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

### Schedule B

#### Indirect Owners

1. Complete Schedule B only if you are submitting an initial application or report. Schedule B asks for information about your indirect owners; you must first complete Schedule A, which asks for information about your direct owners. Use Schedule C to amend this information.

2. Indirect Owners. With respect to each owner listed on Schedule A (except individual owners), list below:

   (a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

   For purposes of this Schedule, a *person* beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

   (b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;

   (c) in the case of an owner that is a trust, the trust and each trustee; and

   (d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.

3. Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

4. In the DE/FE/ column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

5. Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

6. Ownership codes are:  
   - C - 25% but less than 50%
   - E - 75% or more
   - D - 50% but less than 75%
   - F - Other (general partner, trustee, or elected manager)

7. (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

### Schedule B

#### Explicit Owners

<table>
<thead>
<tr>
<th>FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)</th>
<th>DE/FE</th>
<th>Title or Status</th>
<th>Date Title or Status Acquired</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD CORPORATE HOLDINGS LIMITED</td>
<td>FE</td>
<td>SOLE SHAREHOLDER</td>
<td>02/2013</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>AZRACK, JOSEPH, FREDERICK</td>
<td>I</td>
<td>CHIEF INVESTMENT OFFICER, MEMBER - SAFANAD INVESTMENT COMMITTEE,</td>
<td>01/2015</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>2272339</td>
</tr>
<tr>
<td>FUZESI, TIMOTHY, ROGER</td>
<td>I</td>
<td>MANAGING DIRECTOR, REAL ESTATE</td>
<td>07/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>4833083</td>
</tr>
<tr>
<td>RUTLEDGE, JOHN</td>
<td>I</td>
<td>MEMBER, SAFANAD INVESTMENT COMMITTEE</td>
<td>01/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>1350735</td>
</tr>
<tr>
<td>DANNAOUI, ZIAD, MOHAMAD HUSSEIN</td>
<td>I</td>
<td>DIRECTOR</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6774633</td>
</tr>
<tr>
<td>TRICKETT, ANDREW, DAVID</td>
<td>I</td>
<td>PARTNER, HEAD OF INVESTMENTS</td>
<td>06/2018</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>7085055</td>
</tr>
<tr>
<td>EDELMAN, MARTIN, LEE</td>
<td>I</td>
<td>MEMBER, SAFANAD INVESTMENT COMMITTEE</td>
<td>01/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>4606482</td>
</tr>
<tr>
<td>HAHN, DANIEL, JAMES</td>
<td>I</td>
<td>CHIEF FINANCIAL OFFICER</td>
<td>03/2021</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>5837266</td>
</tr>
<tr>
<td>VELLANI, HASSANALI ANDREW, SHAMS</td>
<td>I</td>
<td>CHIEF LEGAL OFFICER &amp; CHIEF COMPLIANCE OFFICER</td>
<td>05/2021</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>7374855</td>
</tr>
</tbody>
</table>

### Schedule C

#### Indirect Owners

1. Complete Schedule C only if you are submitting an initial application or report. Schedule B asks for information about your indirect owners; you must first complete Schedule A, which asks for information about your direct owners. Use Schedule C to amend this information.

2. Indirect Owners. With respect to each owner listed on Schedule A (except individual owners), list below:

   (a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

   For purposes of this Schedule, a *person* beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

   (b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;

   (c) in the case of an owner that is a trust, the trust and each trustee; and

   (d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.

3. Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

4. In the DE/FE/ column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

5. Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

6. Ownership codes are:  
   - C - 25% but less than 50%
   - E - 75% or more
   - D - 50% but less than 75%
   - F - Other (general partner, trustee, or elected manager)

7. (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)</th>
<th>DE/FE</th>
<th>Entity in Which Interest is Owned</th>
<th>Status</th>
<th>Date Status Acquired</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFANAD LIMITED</td>
<td>FE</td>
<td>SAFANAD CORPORATE HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>02/2013</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>01/2010</td>
<td>C</td>
<td>Y</td>
<td>N</td>
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</tr>
<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>06/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>KB GROUP HOLDINGS LTD.</td>
<td>SOLE SHAREHOLDER</td>
<td>06/2006</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
</tr>
<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>SAFANAD LIMITED</td>
<td>DIRECTOR AND CHIEF EXECUTIVE OFFICER</td>
<td>06/2009</td>
<td>F</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
</tr>
<tr>
<td>MB HOLDINGS LIMITED</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>KB GROUP HOLDINGS LIMITED</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>BAHAMDAN, MOHANNAD, ABDULLAH</td>
<td>I</td>
<td>MB HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>03/2015</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>7236884</td>
</tr>
</tbody>
</table>
Schedule R - Miscellaneous

You may use the space below to explain a response to an Item or to provide any other information.

Certain special purpose vehicles wholly-owned by one or more Funds that are feeder funds in a master/feeder fund structure are not listed in Section 7.B.(1) but are included in the reporting for that Section. The Firm utilizes a single Schedule D, Section 7.B. (1) for a master-feeder arrangement for all of its Clients. The term "Employees" as reported herein, includes directly employed individuals of Safanad Inc.; shared employees of other entities under common control with Safanad Inc., and non-executive directors and consultants utilized by Safanad Inc. Formation Capital, LLC ("Formation") is a co-adviser to eight of the Master Funds reported in Section 7.B.(1). Formation and Safanad Inc. share investment discretion with respect to those Master Funds. RAUM for FC Skyfall, LP under Item 7.B.1 uses GBP Year-End 2020 FX Rate of 1.367 in order to convert assets to USD. Regulations enacted in 2020 in the Cayman Islands require closed end- private funds domiciled in the Cayman Islands to undergo financial audits and to submit the audited accounts to the Cayman Islands Financial Authority. Certain of our private funds, audited for the first time in accordance with the new regulations, received qualified opinions as noted in Item 7.B.1 for these private funds. The basis of the qualified opinions reflects the fact that the scope of the audits had been limited to providing assurance over the current year and excluded the audit of opening balances. These funds have in previous years satisfactorily undergone Surprise Examinations of cash balances to satisfy the custody rule.

Schedule R

SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:
SAFANAD MANAGEMENT LIMITED

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.

No Information Filed

You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:
293586

No Information Filed

If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

(1) Address (do not use a P.O. Box):

☐ Same as the filing adviser.

Number and Street 1: C/O MAPLES CORPORATE SERVICES LIMITED
City: KY1-1104, GEORGE TOWN, GRAND CAYMAN

Number and Street 2: UGLAND HOUSE, BOX 309, SOUTH CHURCH STREET
State: Country: Cayman Islands

ZIP+4/Postal Code:

If this address is a private residence, check this box:

(2) Days of week that you normally conduct business at your principal office and place of business:
☐ Monday - Friday ☐ Other:
Normal business hours at this location:
9 AM TO 6 PM

(3) Telephone number at this location:
9 714 312 9700

(4) Facsimile number at this location, if any:
9 714 312 9777

F. Mailing address, if different from your principal office and place of business:
D. If you answer “yes” to C.(3) above, are any of the brokers or dealers related persons?

E. Do you or any related persons currently undertake to file an amendment to this filing, or any subsequent amendments, that could result in a “yes” answer to any part of Item 11.C., 11.D., or 11.E?

F. Has an authorization to act as an attorney, accountant, or federal contractor granted to you or any related persons been revoked or suspended?

G. Provide your Legal Entity Identifier if you have one:

A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.

H. If you have Central Index Key numbers assigned by the SEC (“CIK Numbers”), all of your CIK numbers:

No Information Filed

SECTION 2 SEC Registration

Responses to this Section help us (and you) determine whether you are eligible to register with the SEC.

A. To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections 2.A.(1) through 2.A.(8), below. Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the relying adviser):

☐ (1) are a large advisory firm that either:

(a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or
(b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:

(a) not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
(b) not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

(3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☐ (5) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

☐ (6) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:

If you check this box, you must make both of the representations below:

☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

☐ By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

☐ (7) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d):

If this is your initial filing as a relying adviser, you must make both of these representations:

☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

☐ The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

If you are submitting your annual updating amendment, you must make this representation:

☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

☐ (8) have received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:

Application Number: 803- Date of Order:

☐ (9) are no longer eligible to remain registered with the SEC.
SECTION 3 Form of Organization

A. How are you organized?
   (1) Corporation
   (2) Sole Proprietorship
   (3) Limited Liability Partnership (LLP)
   (4) Partnership
   (5) Limited Liability Company (LLC)
   (6) Limited Partnership (LP)
   (7) Other (specify): CAYMAN ISLANDS LIMITED COMPANY

B. In what month does your fiscal year end each year?
   DECEMBER

C. Under the laws of what state or country are you organized?
   State: Cayman Islands

   If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.

SECTION 4.A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

(1) Section 4.A. asks for information about your direct owners and executive officers.

(2) Direct Owners and Executive Officers. List below the names of:
   (a) each Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Chief Legal Officer, director and any other individuals with similar status or functions;
   (b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);
   Direct owners include any person that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Section 4.A., a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.
   (c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;
   (d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and
   (e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.

(3) Do you have any indirect owners to be reported on Section 4.B. below? Yes No

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.

(5) Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are: NA - less than 5%  B - 10% but less than 25%  D - 50% but less than 75%
A - 5% but less than 10%  C - 25% but less than 50%  E - 75% or more

(7) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.
   Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.
   (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

   (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

   (c) Complete each column.

   Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name) | DE/FE | Title or Status | Date Title or Status Acquired | Ownership Code | Control Person | PR | CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.
--- | --- | --- | --- | --- | --- | --- | ---
BENN, JOHN, MARK | I | DIRECTOR | 07/2013 | NA | Y | N | 6363160
DANNAOUI, ZIAD, MOHAMAD HUSSEIN | I | DIRECTOR | 05/2017 | NA | Y | N | 6774633
JANNAT, SHERWIN, DARIUS | I | DIRECTOR | 05/2017 | NA | Y | N | 6583990
SAFANAD LIMITED | FE | SOLE SHAREHOLDER | 07/2009 | E | Y | N |

SECTION 4.B. Indirect Owners

(1) Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners.

(2) Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:
For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;

(c) in the case of an owner that is a trust, the trust and each trustee; and

(d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.

(3) Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

(5) Complete the Status column by entering the owner’s status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>C</td>
<td>25% but less than 50%</td>
</tr>
<tr>
<td>D</td>
<td>50% but less than 75%</td>
</tr>
<tr>
<td>E</td>
<td>75% or more</td>
</tr>
<tr>
<td>F</td>
<td>Other (general partner, trustee, or elected manager)</td>
</tr>
</tbody>
</table>

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column. Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)</th>
<th>DE/FE/I</th>
<th>Entity in Which Interest Is Owned</th>
<th>Status</th>
<th>Date Status Acquired MM/YYYY</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>01/2010</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
</tr>
<tr>
<td>BAHAMDAN, KAMIL, ABDULLAH</td>
<td>I</td>
<td>SAFANAD LIMITED</td>
<td>DIRECTOR AND CEO</td>
<td>06/2009</td>
<td>F</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
</tr>
<tr>
<td>BAHAMDAN, KAMIL, ABDULLAH</td>
<td>I</td>
<td>KB GROUP HOLDINGS LTD.</td>
<td>SOLE SHAREHOLDER</td>
<td>01/2010</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>7236884</td>
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<tr>
<td>BAHAMDAN, MOHANNAD, ABDULLAH</td>
<td>I</td>
<td>MB HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>03/2015</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>7236884</td>
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<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
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<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>11/2010</td>
<td>C</td>
<td>Y</td>
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<tr>
<td>MB HOLDINGS LIMITED</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
</tr>
</tbody>
</table>

SECTION 4.C. Control Persons

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

Individual Name (if applicable) (Last, First, Middle)
ABU ALNASR, ABDULKAREEM

CRD Number (if any)
6917944

Effective Date
01/18/2015

Termination Date

Business Address:
Number and Street 1
PO BOX 506704
City
DUBAI
State
Country
United Arab Emirates
ZIP+4/Postal Code
11561

Briefly describe the nature of the control:
MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SAFANAD MANAGEMENT LIMITED.

Individual Name (if applicable) (Last, First, Middle)

AL OLAYAN, LUBNA, SULIMAN

CRD Number (if any)
7049129

Effective Date Termination Date
11/09/2018

Business Address:
Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST)
City State Country ZIP+4/Postal Code
DUBAI United Arab Emirates

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:
MS. LUBNA OLAYAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD MANAGEMENT LIMITED.

Individual Name (if applicable) (Last, First, Middle)

AZRACK, JOSEPH, FREDERICK

CRD Number (if any)
2272339

Effective Date Termination Date
02/26/2017

Business Address:
Number and Street 1 Number and Street 2
500 FIFTH AVE, 38TH FLOOR
City State Country ZIP+4/Postal Code
NEW YORK New York United States 10110

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:
MR. JOSEPH AZRACK IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD MANAGEMENT LIMITED.

Individual Name (if applicable) (Last, First, Middle)

EDELMAN, MARTIN, LEE

CRD Number (if any)
4606482

Effective Date Termination Date
01/15/2017

Business Address:
Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST)
City State Country ZIP+4/Postal Code
DUBAI United Arab Emirates

If this address is a private residence, check this box: ☐
Briefly describe the nature of the control:

MR. MARTIN EDELMAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD MANAGEMENT LIMITED.

SECTION 4.D. Control Persons - Public Reporting Companies

No Information Filed

SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:
   SAFANAD GOLDEN EYE MANAGEMENT LIMITED

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.
   No Information Filed

You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:
   293665
   No Information Filed

If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

   (1) Address (do not use a P.O. Box):
   - Same as the filing adviser.
   - Number and Street 1:
     C/O MAPLES CORPORATE SERVICES LIMITED
     City: KY1-1104, GEORGE TOWN, GRAND CAYMAN
   - Number and Street 2:
     UGLAND HOUSE, BOX 309, SOUTH CHURCH STREET
     City: Cayman Islands
   - State: Country:
   - ZIP+4/Postal Code:

   If this address is a private residence, check this box: [ ]

   (2) Days of week that you normally conduct business at your principal office and place of business:
   - Monday - Friday [ ]
   - Other: [ ]
   - Normal business hours at this location:
     9 AM TO 6 PM

   (3) Telephone number at this location:
     9 714 312 9700

   (4) Facsimile number at this location, if any:
     9 714 312 9777

F. Mailing address, if different from your principal office and place of business:
   - Same as the filing adviser.
   - Number and Street 1:
     C/O SAFANAD (DUBAI) LIMITED, OFFICE 402
   - Number and Street 2:
     LEVEL 4, THE GATE (EAST) DIFC, PO BOX 506704
SECTION 2 SEC Registration
Responses to this Section help us (and you) determine whether you are eligible to register with the SEC.

A. To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections A.(1) through 2.A. (8), below. Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the relying adviser):

☐ (1) are a large advisory firm that either:
   (a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or
   (b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:
   (a) not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
   (b) not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

   Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

(3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☐ (5) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

☐ (6) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:
   If you check this box, you must make both of the representations below:
   ☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.
   ☐ By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

☐ (7) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d);
   If this is your initial filing as a relying adviser, you must make both of these representations:
   ☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.
   ☐ The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

   If you are submitting your annual updating amendment, you must make this representation:
   ☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

☐ (8) have received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:
   Application Number: 803- Date of Order:

☐ (9) are no longer eligible to remain registered with the SEC.

SECTION 3 Form of Organization
A. How are you organized?
   ☐ Corporation

G. Provide your Legal Entity Identifier if you have one:

A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.

H. If you have Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:
   No Information Filed
D. If you answer "yes" to C.(3) above, are any of the brokers or dealers related persons?

E. Do you or any related persons have any indirect owners to be reported on Section 4.B. below?

If "yes" to (3) above, is the

STATEMENT OF DISCLOSURE

If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.

SECTION 4.A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

(1) Section 4.A. asks for information about your direct owners and executive officers.

(2) Direct Owners and Executive Officers. List below the names of:

(a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, director and any other individuals with similar status or functions;

(b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);

Direct owners include any person that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Section 4.A., a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;

(d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and

(e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.

(3) Do you have any indirect owners to be reported on Section 4.B. below? Yes No

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.

(5) Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are:

- NA - less than 5%
- B - 10% but less than 25%
- D - 50% but less than 75%
- A - 5% but less than 10%
- C - 25% but less than 50%
- E - 75% or more

(7) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

Note that under this definition, all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

FULL LEGAL NAME

(Individuals: Last Name, First Name, Middle Name)

DE/FEI Title or Status Date Title or Status Acquired MM/YYYY Ownership Code Control Person PR CRD No.

If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.

BENN, JOHN, MARK I DIRECTOR 08/2014 NA Y N 6383160

DANNAOUI, ZIAD, MOHAMAD HUSSEIN I DIRECTOR 05/2017 NA Y N 6774633

JANNAT, SHERWIN, DARIUS I DIRECTOR 05/2017 NA Y N 6583990

SAFANAD LIMITED FE SOLE SHAREHOLDER 08/2014 E Y N

SECTION 4.B. Indirect Owners

(1) Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners.

(2) Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:

(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security. For purposes of this Section 4.B., a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.
D. If you answer "yes" to C.(3) above, are any of the brokers or dealers related persons?

E. Do you or any related persons, business having its authorization to do business denied, suspended, or is under common control with any business that has the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.

(3) Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

(5) Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholding, member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are: C - 25% but less than 50%; D - 50% but less than 75%; E - 75% or more; F - Other (general partner, trustee, or elected manager).

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

**FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)**

<table>
<thead>
<tr>
<th>Name of the Person</th>
<th>DE/FE/I</th>
<th>Entity in Which Interest is Owned</th>
<th>Status</th>
<th>Date Status Acquired MM/YYYY</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
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<tr>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>07/2009</td>
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<td>Y</td>
<td>N</td>
<td>6363365</td>
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<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>KB GROUP HOLDINGS LTD.</td>
<td>SOLE SHAREHOLDER</td>
<td>06/2006</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
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<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>SAFANAD LIMITED</td>
<td>DIRECTOR, CEO</td>
<td>06/2006</td>
<td>F</td>
<td>Y</td>
<td>N</td>
<td>7236884</td>
</tr>
<tr>
<td>BAHAMDAN, MOHANNAD, ABDULLAH</td>
<td>I</td>
<td>MB HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>03/2015</td>
<td>E</td>
<td>Y</td>
<td>N</td>
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<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>06/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
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<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
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<tr>
<td>MB HOLDINGS LIMITED</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
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</table>

**SECTION 4.C. Control Persons**

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

Yes ☐ No ☑

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

**Individual Name (if applicable) (Last, First, Middle)**

ABU ALNASR, ABDULKAREEM

**CRD Number (if any)**

6917944

**Effective Date**

01/18/2015

**Business Address:**

PO BOX 506704

**City**

DUBAI

**Country**

United Arab Emirates

**ZIP+4/Postal Code**

06/2009

If this address is a private residence, check this box: ☐

**Briefly describe the nature of the control:**

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD

**Note:**

The SEC is required by the Regulatory Flexibility Act to consider the effect of its regulations on small entities.
GOLDEYE MANAGEMENT LIMITED.

Individual Name (if applicable) (Last, First, Middle)
AL Olayan, Lubna, Suliman

CRD Number (if any)
7049129

Effective Date Termination Date
11/09/2018

Business Address:
Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code
DUBAI State Country ZIP+4/Postal Code

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:
MS. LUBNA OLAYAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD GOLDEYE MANAGEMENT LIMITED.

Individual Name (if applicable) (Last, First, Middle)
AZrack, Joseph, Frederick

CRD Number (if any)
2272339

Effective Date Termination Date
02/26/2017

Business Address:
Number and Street 1 Number and Street 2
500 FIFTH AVE, 38TH FLOOR PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code
NEW YORK New York United States 10110

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:
MR. JOSEPH AZRACK IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD GOLDEYE MANAGEMENT LIMITED.

Individual Name (if applicable) (Last, First, Middle)
Edelman, Martin, Lee

CRD Number (if any)
4606482

Effective Date Termination Date
01/15/2017

Business Address:
Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code
DUBAI State Country ZIP+4/Postal Code

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:
MR. MARTIN EDELMAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD GOLDEYE MANAGEMENT LIMITED.
### SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name: SAFANAD EDUCATION VENTURES MANAGEMENT LIMITED

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.

<table>
<thead>
<tr>
<th>Business Name</th>
<th>Jurisdiction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number: 293666

If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

### E. Principal Office and Place of Business

(1) Address (do not use a P.O. Box):

- Same as the filing adviser.

<table>
<thead>
<tr>
<th>Number and Street 1</th>
<th>Number and Street 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>C/O MAPLES CORPORATE SERVICES LIMITED</td>
<td>UGLAND HOUSE, BOX 309, SOUTH CHURCH STREET</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>KY1-1104, GEORGE TOWN, GRAND CAYMAN</td>
<td>Cayman Islands</td>
</tr>
</tbody>
</table>

If this address is a private residence, check this box: ☐

(2) Days of week that you normally conduct business at your principal office and place of business:

- Monday - Friday
- Other:

Normal business hours at this location:

9 AM TO 6 PM

(3) Telephone number at this location:

9 714 312 9700

(4) Facsimile number at this location, if any:

9 714 312 9777

### F. Mailing address, if different from your principal office and place of business:

- Same as the filing adviser.

<table>
<thead>
<tr>
<th>Number and Street 1</th>
<th>Number and Street 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>C/O SAFANAD (DUBAI) LIMITED, OFFICE 402</td>
<td>LEVEL 4, THE GATE (EAST) DIFC, PO BOX 506704</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>DUBAI</td>
<td>United Arab Emirates</td>
</tr>
</tbody>
</table>

If this address is a private residence, check this box: ☐
A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.

If you answer "yes" to C.(3) above, are any of the brokers or dealers related persons?

Do you or any related persons have an authorization to act as an attorney, accountant, or federal contractor granted to you or any related persons?

Complete each column.

In what month does your fiscal year end each year?

In connection with advisory services you provide to clients, have you or any of your management or other control persons, or any related persons, ever denied, suspended, or revoked your or any related persons' registration as an investment adviser or your or any related persons' membership in an organization that has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC, or with, an investment adviser that is registered with the SEC, or with, a state securities authority?

In the case of an owner that is a corporation, have you or any of your management or other control persons, or any related persons, ever been denied, suspended, or revoked your or any related persons' registration as an investment adviser or your or any related persons' membership in an organization that has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC, or with, an investment adviser that is registered with the SEC, or with, a state securities authority?

In the case of an owner that is a limited liability company ("LLC"), have you or any of your management or other control persons, or any related persons, ever denied, suspended, or revoked your or any related persons' registration as an investment adviser or your or any related persons' membership in an organization that has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC, or with, an investment adviser that is registered with the SEC, or with, a state securities authority?

In the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your total assets, or (ii) all members of an LLC that is owned, directly or indirectly (including through a disregarded entity), by the owner? 

In the case of an owner that is a corporation, have you or any of your management or other control persons, or any related persons, ever been denied, suspended, or revoked your or any related persons' registration as an investment adviser or your or any related persons' membership in an organization that has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC, or with, an investment adviser that is registered with the SEC, or with, a state securities authority?

In the case of an owner that is a corporation, each of its shareholders that beneficially owns 5% or more of the outstanding voting securities of the corporation? 

In the case of an owner that is a corporation, have you or any of your management or other control persons, or any related persons, ever been denied, suspended, or revoked your or any related persons' registration as an investment adviser or your or any related persons' membership in an organization that has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC, or with, an investment adviser that is registered with the SEC, or with, a state securities authority?

In the case of an owner that is a corporation, each of its shareholders that beneficially owns 5% or more of the outstanding voting securities of the corporation? 

In the case of an owner that is a corporation, have you or any of your management or other control persons, or any related persons, ever been denied, suspended, or revoked your or any related persons' registration as an investment adviser or your or any related persons' membership in an organization that has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC, or with, an investment adviser that is registered with the SEC, or with, a state securities authority?

In the case of an owner that is a corporation, each of its shareholders that beneficially owns 5% or more of the outstanding voting securities of the corporation? 

In the case of an owner that is a corporation, have you or any of your management or other control persons, or any related persons, ever been denied, suspended, or revoked your or any related persons' registration as an investment adviser or your or any related persons' membership in an organization that has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC, or with, an investment adviser that is registered with the SEC, or with, a state securities authority?

In the case of an owner that is a corporation, each of its shareholders that beneficially owns 5% or more of the outstanding voting securities of the corporation? 

In the case of an owner that is a corporation, have you or any of your management or other control persons, or any related persons, ever been denied, suspended, or revoked your or any related persons' registration as an investment adviser or your or any related persons' membership in an organization that has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC, or with, an investment adviser that is registered with the SEC, or with, a state securities authority?

In the case of an owner that is a corporation, each of its shareholders that beneficially owns 5% or more of the outstanding voting securities of the corporation? 

In the case of an owner that is a corporation, have you or any of your management or other control persons, or any related persons, ever been denied, suspended, or revoked your or any related persons' registration as an investment adviser or your or any related persons' membership in an organization that has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC, or with, an investment adviser that is registered with the SEC, or with, a state securities authority?

In the case of an owner that is a corporation, each of its shareholders that beneficially owns 5% or more of the outstanding voting securities of the corporation? 

In the case of an owner that is a corporation, have you or any of your management or other control persons, or any related persons, ever been denied, suspended, or revoked your or any related persons' registration as an investment adviser or your or any related persons' membership in an organization that has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC, or with, an investment adviser that is registered with the SEC, or with, a state securities authority?

In the case of an owner that is a corporation, each of its shareholders that beneficially owns 5% or more of the outstanding voting securities of the corporation? 

Are you a large advisory firm that either:

- has regulatory assets under management of $100 million (in U.S. dollars) or more; or
- has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC?

Or are you a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:

- not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
- not subject to examination by the state securities authority of the state where you maintain your principal office and place of business.

Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

Reserved

Have you your principal office and place of business outside the United States?

Are you a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser?

Are you an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days?

If you check this box, you must make both of the representations below:

- I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

- By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

Are you a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d)?

If this is your initial filing as a relying adviser, you must make both of these representations:

- I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

- The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

If you are submitting your annual updating amendment, you must make this representation:

- Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

Have you received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:

Application Number: 803- Date of Order:

Are you no longer eligible to remain registered with the SEC?

Do you have Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:

No Information Filed
D. If you answer "yes" to C.(3) above, are any of the brokers or dealers related persons?

E. Do you or any related persons:

1. Own at least 25% but less than 50% of the partnership’s capital;
2. Own at least 5% but less than 25% of the capital, the trust and each trustee; and
3. Have contributed, 5% or more of your capital?

Cayman Islands

If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.

SECTION 4.A. Direct Owners and Executive Officers

In this Section, we ask you to identify each other person that, directly or indirectly, controls you.

(1) Section 4.A. asks for information about your direct owners and executive officers.

(2) Direct Owners and Executive Officers. List below the names of:

(a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, and any other individuals with similar status or functions;
(b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act).

Direct owners include any person that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Section 4.A., a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(c) in the case of an owner that is a trust, the trust and each trustee; and

(d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and

(e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.

(3) Do you have any indirect owners to be reported on Section 4.B. below? Yes No

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.

(5) Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are: NA - less than 5% B - 10% but less than 25% D - 50% but less than 75% A - 5% but less than 10% C - 25% but less than 50% E - 75% or more

(7) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

SECTION 4.B. Indirect Owners

(1) Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners.

(2) Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:

(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of voting security of that corporation;

For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership’s capital;

(c) in the case of an owner that is a trust, the trust and each trustee; and
(d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC’s capital, and (ii) if managed by elected managers, all elected managers.

(3) Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

(5) Complete the Status column by entering the owner’s status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are:  C - 25% but less than 50%  E - 75% or more  D - 50% but less than 75%  F - Other (general partner, trustee, or elected manager)

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

   Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

   (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

   (c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

### FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)  
DE/FE/  
Entity in Which Interest is Owned  
Status  
Date Status Acquired  
Ownership Code  
Control Person  
PR  
CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)</th>
<th>DE/FE/</th>
<th>Entity in Which Interest is Owned</th>
<th>Status</th>
<th>Date Status Acquired</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>07/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
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<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>KB GROUP HOLDINGS LTD.</td>
<td>SOLE SHAREHOLDER</td>
<td>06/2006</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
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<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>SAFANAD LIMITED</td>
<td>DIRECTOR, CEO</td>
<td>06/2009</td>
<td>F</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
</tr>
<tr>
<td>BAHAMDAN, MOHANNAD, ABDULLAH</td>
<td>I</td>
<td>MB HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>03/2015</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>7236884</td>
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<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>06/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
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<td>FE</td>
<td>BAHAMADAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
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<tr>
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<td>FE</td>
<td>BAHAMADAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
</tbody>
</table>

### SECTION 4.C. Control Persons

Yes  No

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th>CRD Number (if any)</th>
<th>Effective Date</th>
<th>Termination Date</th>
<th>Business Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABU ALNASR, ABDULKAREEM</td>
<td>6917944</td>
<td>01/18/2015</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number and Street 1  
Number and Street 2  
City  
State  
Country  
ZIP+4/Postal Code  

If this address is a private residence, check this box:  

Briefly describe the nature of the control:

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD EDUCATION VENTURES MANAGEMENT LIMITED.
D. If you answer "yes" to C.(3) above, are any of the brokers or dealers related persons?

E. Do you or any related persons hold a substantial ownership interest in any registered entity?

In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is a foreign entity, and "I" if the owner is an intermediary. In the PR column, enter "PR" if the owner is a public reporting company under Sections 13 or 15(d) of the Exchange Act.

Continue up the chain of ownership listing all 25% owners at each level.

Days of week that you normally conduct business at your principal place of business:

Is the listed adviser: a) an independent public accountant (a person who has not been in a direct or indirect relationship with you or any related persons in the past 3 years, an advisory affiliate, or a parent or subsidiary of such a person), b) a state securities supervisor, or c) a related person?

If this address is a private residence, check this box: [ ]

Briefly describe the nature of the control:

MS. LUBNA Olayan is a Director of Safanad Limited, which is the indirect owner of Safanad Inc., which in turn, controls Safanad Education Ventures Management Limited.

Individual Name (if applicable) (Last, First, Middle)
AZRACK, JOSEPH, FREDERICK

CRD Number (if any)
2272339

Effective Date 02/26/2017

Business Address:
Number and Street 1 500 FIFTH AVE, 38TH FLOOR
City NEW YORK
State New York
Country United States
ZIP+4/Postal Code 10110

If this address is a private residence, check this box: [ ]

Briefly describe the nature of the control:

MR. JOSEPH AZRACK is a Director of Safanad Limited, which is the indirect owner of Safanad Inc., which in turn, controls Safanad Education Ventures Management Limited.

Individual Name (if applicable) (Last, First, Middle)
EDELMAN, MARTIN, LEE

CRD Number (if any)
4606482

Effective Date 01/05/2017

Business Address:
Number and Street 1 LEVEL 4, THE GATE (EAST)
City DUBAI
State United Arab Emirates
Country United Arab Emirates
ZIP+4/Postal Code

If this address is a private residence, check this box: [ ]

Briefly describe the nature of the control:

MR. MARTIN EDELMAN is a Director of Safanad Limited, which is the indirect owner of Safanad Inc., which in turn controls Safanad Education Ventures Management Limited.

SECTION 4.D. Control Persons - Public Reporting Companies

CRD Number (if any) 7049129

Effective Date 11/09/2018

Business Address:
Number and Street 1 LEVEL 4, THE GATE (EAST)
City DUBAI
State United Arab Emirates
Country United Arab Emirates
ZIP+4/Postal Code

If this address is a private residence, check this box: [ ]

Briefly describe the nature of the control:

If you answer "yes" to C.(3) above, are any of the brokers or dealers related persons?
SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:
   SSOP MANAGEMENT LLC

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.

   | No Information Filed |

   You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:

   | 293673 |

   If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

(1) Address (do not use a P.O. Box):

   - Same as the filing adviser.

   Number and Street 1: 505 5TH AVENUE
   Number and Street 2: 24TH FLOOR
   City: NEW YORK
   State: New York
   Country: United States
   ZIP+4/Postal Code: 10017-4902

   If this address is a private residence, check this box: ✓

(2) Days of week that you normally conduct business at your principal office and place of business:

   - Monday - Friday
   Normal business hours at this location: 9 AM TO 6 PM

(3) Telephone number at this location:

   212 468 5600

(4) Facsimile number at this location, if any:

   212 468 5649

F. Mailing address, if different from your principal office and place of business address:

   - Same as the filing adviser.

   Number and Street 1: 
   Number and Street 2: 
   City: 
   State: 
   Country: 
   ZIP+4/Postal Code: 

   If this address is a private residence, check this box: ✓

G. Provide your Legal Entity Identifier if you have one:

   A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.
SECTION 2 SEC Registration

Responses to this Section help us (and you) determine whether you are eligible to register with the SEC.

A. To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections 2.A.(1) through 2.A.(8), below. Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the relying adviser):

☐ (1) are a large advisory firm that either:
   (a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or
   (b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:
   (a) not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
   (b) not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

   Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

☐ (3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☐ (5) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

☐ (6) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:

   If you check this box, you must make both of the representations below:

   ☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

   ☐ By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

☐ (7) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d);

   If this is your initial filing as a relying adviser, you must make both of these representations:

   ☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

   ☐ The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

   If you are submitting your annual updating amendment, you must make this representation:

   ☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

☐ (8) have received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:

   Application Number: 803- Date of Order:

☐ (9) are no longer eligible to remain registered with the SEC.

SECTION 3 Form of Organization

A. How are you organized?

☐ Corporation
☐ Sole Proprietorship
☐ Limited Liability Partnership (LLP)
☐ Partnership
☐ Limited Liability Company (LLC)
☐ Limited Partnership (LP)
☐ Other (specify):

B. In what month does your fiscal year end each year?

DECEMBER
C. Under the laws of what state or country are you organized?

State: Delaware
Country: United States

If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.

SECTION 4.A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

(1) Section 4.A. asks for information about your direct owners and executive officers.

(2) Direct Owners and Executive Officers. List below the names of:

(a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, director and any other individuals with similar status or functions;

(b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);

Direct owners include any person that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Section 4.A., a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital; and

(d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and

(e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.

(3) Do you have any indirect owners to be reported on Section 4.B. below?  ☐ Yes ☐ No

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.

(5) Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes: NA - less than 5%  B - 10% but less than 25%  D - 50% but less than 75%
A - 5% but less than 10%  C - 25% but less than 50%  E - 75% or more

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)</th>
<th>DE/FE/I</th>
<th>Title or Status</th>
<th>Date Title or Status Acquired</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No.</th>
<th>If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
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<tbody>
<tr>
<td>BENN, JOHN, MARK</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CFO</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6363160</td>
<td></td>
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<tr>
<td>DANNAOUI, ZIAD, MOHAMAD HUSSEIN</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC.</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6774633</td>
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<tr>
<td>JANNAT, SHERWIN, DARIUS</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CHIEF LEGAL OFFICER AND CHIEF COMPLIANCE OFFICER</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
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<tr>
<td>PICA (II), VINCENT, THADDEUS</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND PRESIDENT</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>1500485</td>
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<tr>
<td>SAFANAD INC.</td>
<td>DE</td>
<td>SOLE SHAREHOLDER</td>
<td>08/2016</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>170969</td>
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SECTION 4.B. Indirect Owners

(1) Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners.

(2) Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:

(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership’s capital;

(c) in the case of an owner that is a trust, the trust and each trustee; and

(d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC’s capital, and (ii) if managed by elected managers, all elected managers.

(3) Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is
(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

(5) Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are:  
- C - 25% but less than 50%
- D - 50% but less than 75%
- E - 75% or more
- F - Other (general partner, trustee, or elected manager)

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

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<tr>
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<th>Entity in Which Interest is Owned</th>
<th>Status</th>
<th>Date Status Acquired MM/YYYY</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
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<tr>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>07/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
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<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>KB GROUP HOLDINGS LTD.</td>
<td>SOLE SHAREHOLDER</td>
<td>06/2006</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
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<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>SAFANAD LIMITED</td>
<td>DIRECTOR, CEO</td>
<td>06/2009</td>
<td>F</td>
<td>Y</td>
<td>N</td>
<td>6363365</td>
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<tr>
<td>BAHAMDAN, MOHANNAD, ABDULLAH</td>
<td>I</td>
<td>MB HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>03/2015</td>
<td>E</td>
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<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>06/2009</td>
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<td>N</td>
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<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
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<td>Y</td>
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<tr>
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<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
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<td>FE</td>
<td>SAFANAD INC.</td>
<td>SOLE SHAREHOLDER</td>
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<td>FE</td>
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<td>SOLE SHAREHOLDER</td>
<td>02/2013</td>
<td>F</td>
<td>Y</td>
<td>N</td>
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</table>

SECTION 4.C. Control Persons

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

Individual Name (if applicable) (Last, First, Middle)
ABU ALNASR, ABDULKAREEM

CRD Number (if any)
6917944

Effective Date Termination Date
01/18/2015

Business Address:
Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code
DUBAI United Arab Emirates

If this address is a private residence, check this box: □

Briefly describe the nature of the control:
MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSOP MANAGEMENT LLC.

Individual Name (if applicable) (Last, First, Middle)
AL OLAYAN, LUBNA, SULIMAN
SECTION 4.D. Control Persons - Public Reporting Companies

No Information Filed
SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:
   SAFANAD SENIOR CARE II MANAGEMENT, LLC

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.
   No Information Filed

   You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:
   293685
   No Information Filed

   If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

   (1) Address (do not use a P.O. Box):

      ☑ Same as the filing adviser.

      Number and Street 1: Number and Street 2:
      505 5TH AVENUE 24TH FLOOR
      City: State: Country: ZIP+4/Postal Code:
      NEW YORK New York United States 10017-4902

      If this address is a private residence, check this box: ☐

   (2) Days of week that you normally conduct business at your principal office and place of business:

      ☑ Monday - Friday ☐ Other:

      Normal business hours at this location:
      9 AM TO 6 PM

   (3) Telephone number at this location:
      212 468 5600

   (4) Facsimile number at this location, if any:
      212 468 5649

F. Mailing address, if different from your principal office and place of business address:

      ☑ Same as the filing adviser.

      Number and Street 1: Number and Street 2:
      City: State: Country: ZIP+4/Postal Code:

      If this address is a private residence, check this box: ☐

G. Provide your Legal Entity Identifier if you have one:

   A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.

H. If you have Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:
   No Information Filed
SECTION 2 SEC Registration

Responses to this Section help us (and you) determine whether you are eligible to register with the SEC.

A. To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections 2.A.(1) through 2.A.(8), below. Part IA Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the relying adviser):

☐ (1) are a large advisory firm that either:

- has regulatory assets under management of $100 million (in U.S. dollars) or more; or
- has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:

- not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
- subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

☐ (3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☑ (5) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

☐ (6) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:

If you check this box, you must make both of the representations below:

☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

☐ By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

☐ (7) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d);

If this is your initial filing as a relying adviser, you must make both of these representations:

☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

☐ The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

If you are submitting your annual updating amendment, you must make this representation:

☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

☐ (8) have received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:

Application Number: 803- Date of Order:

☐ (9) are no longer eligible to remain registered with the SEC.

SECTION 3 Form of Organization

A. How are you organized?

☐ Corporation
☐ Sole Proprietorship
☐ Limited Liability Partnership (LLP)
☐ Partnership
☐ Limited Liability Company (LLC)
☐ Limited Partnership (LP)
☐ Other (specify):

B. In what month does your fiscal year end each year?

DECEMBER
C. Under the laws of what state or country are you organized?

State: Delaware
Country: United States

If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.

SECTION 4.A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

(1) Section 4.A. asks for information about your direct owners and executive officers.

(2) Direct Owners and Executive Officers. List below the names of:

(a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, director and any other individuals with similar status or functions;

(b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);

Direct owners include any person that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Section 4.A., a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;

(d) in the case of a trust that directly owns 5% or more of a class of your voting securities, that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and

(e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.

(3) Do you have any indirect owners to be reported on Section 4.B. below?  Yes ☐ No ☐

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.

(5) Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are:

NA - less than 5%  B - 10% but less than 25%  D - 50% but less than 75%
A - 5% but less than 10%  C - 25% but less than 50%  E - 75% or more

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

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<th>Title or Status</th>
<th>Date Title or Status Acquired</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No.</th>
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</thead>
<tbody>
<tr>
<td>(Individuals: Last Name, First Name, Middle Name)</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
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<td>SHAREHOLDER</td>
<td>06/2012</td>
<td>D</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>PICA (II), VINCENT, THADDEUS</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND PRESIDENT</td>
<td>06/2012</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>1500485</td>
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<td>Y</td>
<td>N</td>
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<td>WHITMAN, ARNOLD, MILLS</td>
<td>I</td>
<td>DIRECTOR</td>
<td>02/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
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</tbody>
</table>

SECTION 4.B. Indirect Owners

(1) Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners.

(2) Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:

(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;

(c) in the case of an owner that is a trust, the trust and each trustee; and

(d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.

(3) Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

(5) Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of ownership codes.
(6) Ownership codes are:  
- C - 25% but less than 50%  
- E - 75% or more  
- D - 50% but less than 75%  
- F - Other (general partner, trustee, or elected manager)

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

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<th>DE/FE1</th>
<th>Entity in Which Interest is Owned</th>
<th>Status</th>
<th>Date Status Acquired MM/YYYY</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
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<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>07/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td>6363865</td>
</tr>
<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>KB GROUP HOLDINGS LTD.</td>
<td>SOLE SHAREHOLDER</td>
<td>06/2006</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>6363865</td>
</tr>
<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>SAFANAD LIMITED</td>
<td>DIRECTOR, CEO</td>
<td>06/2009</td>
<td>F</td>
<td>Y</td>
<td>N</td>
<td>6363865</td>
</tr>
<tr>
<td>BAHAMDAN, MOHANNAD, ABDULLAH</td>
<td>I</td>
<td>MB HOLDINGS LIMITED</td>
<td>MEMBER</td>
<td>03/2015</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>7236884</td>
</tr>
<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>06/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>MB HOLDINGS LIMITED</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>SAFANAD CORPORATE HOLDINGS LIMITED</td>
<td>FE</td>
<td>SAFANAD INC.</td>
<td>SOLE SHAREHOLDER</td>
<td>02/2013</td>
<td>F</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>SAFANAD LIMITED</td>
<td>FE</td>
<td>SAFANAD CORPORATE HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>02/2013</td>
<td>F</td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
</tbody>
</table>

SECTION 4.C. Control Persons

Yes ☐ No ☒

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th>CRD Number (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABU ALNASR, ABDULKAREEM</td>
<td>6917944</td>
</tr>
</tbody>
</table>

Effective Date: 01/18/2015

Business Address:

Number and Street 1: LEVEL 4, THE GATE (EAST)
Number and Street 2: PO BOX 506704, DIFC
City: DUBAI
State: United Arab Emirates
Country: United Arab Emirates
ZIP+4/Postal Code: PO BOX 506704, DIFC

If this address is a private residence, check this box: ☑

Briefly describe the nature of the control:

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD SENIOR CARE II MANAGEMENT, LLC.

<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th>CRD Number (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>AL OLAYAN, LUBNA, SULIMAN</td>
<td>7049129</td>
</tr>
</tbody>
</table>

Effective Date: 03/2015

Term: 06/2017

Control Person: ☑

Business Address:

Number and Street 1: LEVEL 4, THE GATE (EAST)
Number and Street 2: PO BOX 506704, DIFC
City: DUBAI
State: United Arab Emirates
Country: United Arab Emirates
ZIP+4/Postal Code: PO BOX 506704, DIFC

If this address is a private residence, check this box: ☑

Briefly describe the nature of the control:

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD SENIOR CARE II MANAGEMENT, LLC.
11/09/2018

Business Address:
Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code
DUBAI

If this address is a private residence, check this box: 

Briefly describe the nature of the control:
MS. LUBNA OLAYAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD SENIOR CARE II MANAGEMENT, LLC.

Individual Name (if applicable) (Last, First, Middle)
AZRACK, JOSEPH, FREDERICK

CRD Number (if any)
2272339

Effective Date Termination Date
02/26/2017

Business Address:
Number and Street 1 Number and Street 2
500 FIFTH AVE, 38TH FLOOR
City State Country ZIP+4/Postal Code
NEW YORK New York United States 10110

If this address is a private residence, check this box: 

Briefly describe the nature of the control:
MR. JOSEPH AZRACK IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT OWNER OF SAFANAD INC., WHICH IN TURN, CONTROLS SAFANAD SENIOR CARE II MANAGEMENT, LLC.

Individual Name (if applicable) (Last, First, Middle)
BENN, JOHN, MARK

CRD Number (if any)
6363160

Effective Date Termination Date
01/26/2018

Business Address:
Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST)
City State Country ZIP+4/Postal Code
DUBAI

If this address is a private residence, check this box: 

Briefly describe the nature of the control:
MR. JOHN MARK BENN IS THE CHIEF FINANCIAL OFFICER OF SAFANAD LIMITED, WHICH IS INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SAFANAD SENIOR CARE II MANAGEMENT, LLC.

Individual Name (if applicable) (Last, First, Middle)
DANNAOUI, ZIAD, MOHAMAD HUSSEIN

CRD Number (if any)
6774633

Effective Date Termination Date
07/01/2016
SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:
   SAFANAD SENIOR CARE V MANAGEMENT LLC

B. If you are an investment adviser with more than one principal office and place of business:
   No Information Filed

SECTION 4D. Control Persons - Public Reporting Companies

No Information Filed
B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.

No Information Filed

You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:

293686

No Information Filed

If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

(1) Address (do not use a P.O. Box):

☑ Same as the filing adviser.

Number and Street 1: 505 5TH AVENUE
City: NEW YORK

Number and Street 2: 24TH FLOOR
State: New York

ZIP+4/Postal Code: 10017-4902

If this address is a private residence, check this box:

(2) Days of week that you normally conduct business at your principal office and place of business:

☑ Monday - Friday  ☐ Other:

Normal business hours at this location:

9 AM TO 6 PM

(3) Telephone number at this location:

212 468 5600

(4) Facsimile number at this location, if any:

212 468 5649

F. Mailing address, if different from your principal office and place of business address:

☑ Same as the filing adviser.

Number and Street 1:  
City:

Number and Street 2:  
State:

ZIP+4/Postal Code: 10017-4902

If this address is a private residence, check this box:

G. Provide your Legal Entity Identifier if you have one:

A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.

H. If you have Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:

No Information Filed

SECTION 2 SEC Registration

Responses to this Section help us (and you) determine whether you are eligible to register with the SEC.
To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections 2.A.(1) through 2.A.(8), below. Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the relying adviser):

1. are a large advisory firm that either:
   a. has regulatory assets under management of $100 million (in U.S. dollars) or more; or
   b. has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

2. are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:
   a. not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
   b. not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

   Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

3. Reserved

4. have your principal office and place of business outside the United States;

5. are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

6. are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:

   If you check this box, you must make both of the representations below:

   a. I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

   b. By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

7. are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d):

   If this is your initial filing as a relying adviser, you must make both of these representations:

   a. I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

   b. The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

   If you are submitting your annual updating amendment, you must make this representation:

   a. Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

8. have received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:

   Application Number: 803- Date of Order:

9. are no longer eligible to remain registered with the SEC.

SECTION 3 Form of Organization

A. How are you organized?

   Corporation
   Sole Proprietorship
   Limited Liability Partnership (LLP)
   Partnership
   Limited Liability Company (LLC)
   Limited Partnership (LP)
   Other (specify):

B. In what month does your fiscal year end each year?

   DECEMBER

C. Under the laws of what state or country are you organized?

   State: Delaware
   Country: United States

If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.
SECTION 4.A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

(1) Section 4.A. asks for information about your direct owners and executive officers.

(2) Direct Owners and Executive Officers. List below the names of:

(a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, director and any other individuals with similar status or functions;

(b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);

Direct owners include any person that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Section 4.A., a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;

(d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and

(e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.

(3) Do you have any indirect owners to be reported on Section 4.B. below?  ☐ Yes ☐ No

(4) In the DE/FE/I column below, enter “DE” if the owner is a domestic entity, “FE” if the owner is an entity incorporated or domiciled in a foreign country, or “I” if the owner or executive officer is an individual.

(5) Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are:

<table>
<thead>
<tr>
<th>Ownership Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>B</td>
<td>Less than 10%</td>
</tr>
<tr>
<td>D</td>
<td>5% but less than 25%</td>
</tr>
<tr>
<td>E</td>
<td>25% but less than 50%</td>
</tr>
<tr>
<td>F</td>
<td>75% or more</td>
</tr>
</tbody>
</table>

(7) In the Control Person column, enter “Yes” if the person has control as defined in the Glossary of Terms to Form ADV, and enter “No” if the person does not have control.

(a) If you have Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:

<table>
<thead>
<tr>
<th>CRD</th>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6363365</td>
<td>BENN, JOHN, MARK, DIRECTOR OF SAFANAD, INC. AND CFO</td>
</tr>
<tr>
<td>6363365</td>
<td>DANNOUNI, ZIA, MOHAMAD HUSSEIN, DIRECTOR OF SAFANAD, INC.</td>
</tr>
<tr>
<td>6363365</td>
<td>JANNAT, SHERWIN, DARIUS, DIRECTOR OF SAFANAD, INC. AND CHIEF LEGAL OFFICER AND CHIEF COMPLIANCE OFFICER</td>
</tr>
<tr>
<td>6363365</td>
<td>PICA (II), VINCENT, THADDEUS, DIRECTOR OF SAFANAD, INC. AND PRESIDENT</td>
</tr>
<tr>
<td>6363365</td>
<td>SAFANAD INC., SOLE SHAREHOLDER</td>
</tr>
</tbody>
</table>

SECTION 4.B. Indirect Owners

(1) Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners.

(2) Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:

(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership’s capital;

(c) in the case of an owner that is a trust, the trust and each trustee; and

(d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC’s capital, and (ii) if managed by elected managers, all elected managers.

(3) Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

(4) In the DE/FE/I column below, enter “DE” if the owner is a domestic entity, “FE” if the owner is an entity incorporated or domiciled in a foreign country, or “I” if the owner is an individual.

(5) Complete the Status column by entering the owner’s status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are:

<table>
<thead>
<tr>
<th>Ownership Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>C</td>
<td>25% but less than 50%</td>
</tr>
<tr>
<td>D</td>
<td>50% but less than 75%</td>
</tr>
<tr>
<td>E</td>
<td>75% or more</td>
</tr>
<tr>
<td>F</td>
<td>Other (general partner, trustee, or elected manager)</td>
</tr>
</tbody>
</table>

(7) In the Control Person column, enter “Yes” if the person has control as defined in the Glossary of Terms to Form ADV, and enter “No” if the person does not have control.
Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter “PR” if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)</th>
<th>DE/FEI</th>
<th>Entity in Which Interest is Owned</th>
<th>Status</th>
<th>Date Status Acquired MM/DD/YYYY</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>07/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>SAFANAD LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>06/2006</td>
<td>E</td>
<td>Y</td>
<td>N 6363365</td>
</tr>
<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>SAFANAD LIMITED</td>
<td>DIRECTOR, CEO</td>
<td>06/2009</td>
<td>F</td>
<td>Y</td>
<td>N 6363365</td>
</tr>
<tr>
<td>BAHAMDAN, MOHANNAD, ABDULLAH</td>
<td>I</td>
<td>MB HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>03/2015</td>
<td>E</td>
<td>Y</td>
<td>N 7236884</td>
</tr>
<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>06/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>MB HOLDINGS LIMITED</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>SAFANAD CORPORATE HOLDINGS LIMITED</td>
<td>FE</td>
<td>SAFANAD INC.</td>
<td>SOLE SHAREHOLDER</td>
<td>02/2013</td>
<td>E</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>SAFANAD LIMITED</td>
<td>FE</td>
<td>SAFANAD CORPORATE HOLDINGS LIMITED</td>
<td>SHAREHOLDER</td>
<td>02/2013</td>
<td>E</td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

**SECTION 4.C. Control Persons**

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

---

**Individual Name (if applicable) (Last, First, Middle)**

ABU ALNASR, ABDULKAREEM

**CRD Number (if any)**

6917944

**Effective Date**

01/18/2015

**Business Address:**

Number and Street 1

LEVEL 4, THE GATE (EAST)

PO BOX 506704, DIFC

City

DUBAI

**Country**

United Arab Emirates

**ZIP+4/Postal Code**

If this address is a private residence, check this box: 

Briefly describe the nature of the control:

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SAFANAD SENIOR CARE V MANAGEMENT LLC.

---

**Individual Name (if applicable) (Last, First, Middle)**

AL OLAYAN, LUBNA, SULIMAN

**CRD Number (if any)**

7049129

**Effective Date**

11/09/2019

**Business Address:**
Telephone number at this location: 212 468 5600
Facsimile number at this location, if any: 212 468 5649

Briefly describe the nature of the control:
MS. LUBNA Olayan is a director of Safanad Limited, which is the indirect sole-owner of Safanad Inc., which in turn controls Safanad Senior Care V Management LLC.

Individual Name (if applicable) (Last, First, Middle)
AZRACK, JOSEPH, FREDERICK

CRD Number (if any)
2272339

Effective Date
Termination Date
02/26/2017

Business Address:
Number and Street 1
500 FIFTH AVE, 38TH FLOOR
City
NEW YORK
State
New York
Country
United States
ZIP+4/Postal Code
10110

Briefly describe the nature of the control:
MR. JOSEPH AZRACK is a director of Safanad Limited, which is the indirect sole-owner of Safanad Inc., which in turn controls Safanad Senior Care V Management LLC.

Individual Name (if applicable) (Last, First, Middle)
BAHAMDAN, ABDULLAH, SALEM

CRD Number (if any)
6917937

Effective Date
Termination Date
07/23/2009

Business Address:
Number and Street 1
LEVEL 4, THE GATE (EAST)
City
DUBAI
State
Dubai
Country
United Arab Emirates
ZIP+4/Postal Code

Briefly describe the nature of the control:
MR. ABDULLAH SALEM BAHAMDAN is a director of Safanad Limited (which is the indirect sole-owners of Safanad Inc.)

Individual Name (if applicable) (Last, First, Middle)
BAHAMDAN, KAMAL, ABDULLAH

CRD Number (if any)
6363365

Effective Date
Termination Date
06/03/2009

Business Address:
Number and Street 1
LEVEL 4, THE GATE (EAST)
City
DUBAI
State
Dubai
Country
United Arab Emirates
ZIP+4/Postal Code
<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Country</th>
<th>ZIP+4/Postal Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DUBAI</td>
<td></td>
<td>United Arab Emirates</td>
<td></td>
</tr>
</tbody>
</table>

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:

MR. KAMAL ABDULLAH BAHAMDAN IS THE CHIEF EXECUTIVE OFFICER OF SAFANAD LIMITED (WHICH IS THE INDIRECT OWNER OF SAFANAD INC.)

<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>BENN, JOHN, MARK</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CRD Number (if any)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6363160</td>
<td></td>
</tr>
</tbody>
</table>

Effective Date: 01/26/2018

Termination Date: 01/26/2018

Business Address:

<table>
<thead>
<tr>
<th>Number and Street 1</th>
<th>Number and Street 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEVEL 4, THE GATE (EAST)</td>
<td>PO BOX 506704, DIFC</td>
</tr>
</tbody>
</table>

City: DUBAI

State: United Arab Emirates

Country: United Arab Emirates

ZIP+4/Postal Code:  

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:

MR. JOHN MARK BENN IS THE CHIEF FINANCIAL OFFICER OF SAFANAD LIMITED (WHICH IS INDIRECT SOLE-OWNER OF SAFANAD INC.)

<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>DANNAOUI, ZIAD, MOHAMAD HUSSEIN</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CRD Number (if any)</th>
<th></th>
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<tbody>
<tr>
<td>6774633</td>
<td></td>
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</tbody>
</table>

Effective Date: 07/01/2016

Termination Date: 07/01/2016

Business Address:

<table>
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<tr>
<th>Number and Street 1</th>
<th>Number and Street 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEVEL 4, THE GATE (EAST)</td>
<td>PO BOX 506704, DIFC</td>
</tr>
</tbody>
</table>

City: DUBAI

State: United Arab Emirates

Country: United Arab Emirates

ZIP+4/Postal Code:  

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:

MR. ZIAD DANNAOUI IS THE PRESIDENT OF SAFANAD LIMITED (WHICH IS THE INDIRECT OWNER OF SAFANAD INC.)

<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>EDELMAN, MARTIN, LEE</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CRD Number (if any)</th>
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<tr>
<td>4606482</td>
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Effective Date: 01/05/2017

Termination Date: 01/05/2017

Business Address:

<table>
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<tr>
<th>Number and Street 1</th>
<th>Number and Street 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEVEL 4, THE GATE (EAST)</td>
<td>PO BOX 506704, DIFC</td>
</tr>
</tbody>
</table>

City: DUBAI

State: United Arab Emirates

Country: United Arab Emirates

ZIP+4/Postal Code:  

If this address is a private residence, check this box: ☐
SECTION 4.D. Control Persons - Public Reporting Companies

No Information Filed

SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:
SAFANAD SSCIP VI MANAGEMENT, LLC

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser’s Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.

No Information Filed

You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:

293687

No Information Filed

If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

(1) Address (do not use a P.O. Box):

☑ Same as the filing adviser.

Number and Street 1:  Number and Street 2:
505 5TH AVENUE  24TH FLOOR
City:  State:  Country:  ZIP+4/Postal Code:  10017-4902
NEW YORK  New York  United States

If this address is a private residence, check this box: ✗

(2) Days of week that you normally conduct business at your principal office and place of business:

☑ Monday - Friday  ☐ Other:

Normal business hours at this location:
9 AM TO 6 PM

(3) Telephone number at this location:
212 468 5600

(4) Facsimile number at this location, if any:
212 468 5649

F. Mailing address, if different from your principal office and place of business address:

☑ Same as the filing adviser.

Number and Street 1:  Number and Street 2:
City:  State:  Country:  ZIP+4/Postal Code:

If this address is a private residence, check this box: ✗
G. Provide your Legal Entity Identifier if you have one:

A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.

H. If you have Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:

No Information Filed

SECTION 2 SEC Registration

Responses to this Section help us (and you) determine whether you are eligible to register with the SEC.

A. To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections 2.A.(1) through 2.A.(8), below. Part 1.A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the relying adviser):

☐ (1) are a large advisory firm that either:
   (a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or
   (b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:
   (a) not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
   (b) not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

   Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

☐ (3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☐ (5) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

☐ (6) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:

   If you check this box, you must make both of the representations below:

   ☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

   ☐ By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

☐ (7) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d);

   If this is your initial filing as a relying adviser, you must make both of these representations:

   ☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

   The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

   If you are submitting your annual updating amendment, you must make this representation:

   ☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

☐ (8) have received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:

   Application Number: 803- Date of Order:

☐ (9) are no longer eligible to remain registered with the SEC.

SECTION 3 Form of Organization

A. How are you organized?

☐ Corporation

☐ Sole Proprietorship

☐ Limited Liability Partnership (LLP)

☐ Partnership
SECTION 4.A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

(1) Section 4.A. asks for information about your direct owners and executive officers.

(2) Direct Owners and Executive Officers. List below the names of:

(a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, director and any other individuals with similar status or functions;

(b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);

Direct owners include any person that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Section 4.A., a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;

(d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and

(e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.

(3) Do you have any indirect owners to be reported on Section 4.B. below?  ☑ Yes  ☐ No

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.

(5) Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are: NA - 5% or more of a class of voting securities; A - 5% but less than 10%; B - 10% but less than 25%; C - 25% but less than 50%; D - 50% but less than 75%; E - 75% or more

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME</th>
<th>DE/FE/I</th>
<th>Title or Status</th>
<th>Date Title or Status Acquired MM/YYYY</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENN, JOHN, MARK</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CFO</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6363160</td>
</tr>
<tr>
<td>DANNAOUI, ZIAD, MOHAMAD HUSSEIN</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC.</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6774633</td>
</tr>
<tr>
<td>JANNAT, SHERWIN, DARIUS</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CHIEF LEGAL OFFICER AND CHIEF COMPLIANCE OFFICER</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6583990</td>
</tr>
<tr>
<td>PICA (II), VINCENT, THADDEUS</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND PRESIDENT</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>1500485</td>
</tr>
<tr>
<td>SAFANAD INC.</td>
<td>DE</td>
<td>SOLE SHAREHOLDER</td>
<td>02/2015</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>170969</td>
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</tbody>
</table>

SECTION 4.B. Indirect Owners

(1) Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners

(2) Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:

(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.
(b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;

(c) in the case of an owner that is a trust, the trust and each trustee; and

(d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.

(3) Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

(5) Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are:  

- C - 25% but less than 50%  
- D - 50% but less than 75%  
- E - 75% or more  
- F - Other (general partner, trustee, or elected manager)

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

### FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name) | DE/FE/I | Entity in Which Interest is Owned | Status | Date Status Acquired MM/YYYY | Ownership Code | Control Person | PR | CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.
--- | --- | --- | --- | --- | --- | --- | --- | ---
BAHAMDIAN INVESTMENT GROUP | FE | SAFANAD LIMITED | SHAREHOLDER | 07/2009 | C | Y | N
BAHAMDIAN, KAMAL, ABDULLAH | I | KB GROUP HOLDINGS LTD. | SOLE SHAREHOLDER | 06/2006 | E | Y | N 6363365
BAHAMDIAN, KAMAL, ABDULLAH | I | SAFANAD LIMITED | DIRECTOR, CEO | 06/2009 | F | Y | N 6363365
BAHAMDIAN, MOHANNAD, ABDULLAH | I | MB HOLDINGS LIMITED | SOLE SHAREHOLDER | 03/2015 | E | Y | N 7236884
KB GROUP HOLDINGS LTD. | FE | SAFANAD LIMITED | SHAREHOLDER | 06/2009 | C | Y | N
KB GROUP HOLDINGS LTD. | FE | BAHAMDAN INVESTMENT GROUP | MEMBER | 02/2020 | C | Y | N
MB HOLDINGS LIMITED | FE | BAHAMDAN INVESTMENT GROUP | MEMBER | 02/2020 | C | Y | N
SAFANAD CORPORATE HOLDINGS LIMITED | FE | SAFANAD INC. | SOLE SHAREHOLDER | 02/2013 | E | Y | N
SAFANAD LIMITED | FE | SAFANAD CORPORATE HOLDINGS LIMITED | SOLE SHAREHOLDER | 02/2013 | E | Y | N

### SECTION 4.C. Control Persons

**Yes**  **No**

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

---

Individual Name (if applicable) (Last, First, Middle)  
ABU ALNASR, ABDULKAREEM

CRD Number (if any)  
6917944

Effective Date  
01/18/2015

Termination Date

Business Address:

Number and Street 1  
LEVEL 4, THE GATE (EAST)  
DUBAI

Number and Street 2  
PO BOX 506704, DIFC

City  
DUBAI

State  
United Arab Emirates

Country  
United Arab Emirates

ZIP+4/Postal Code  
06/2009

If this address is a private residence, check this box: [ ]
Briefly describe the nature of the control:

Mr. Abdul Kareem Abu Alnasr is a director of Safanad Limited, which is the indirect sole-owner of Safanad Inc., which in turn controls Safanad SCP VI Management, LLC.

Individual Name (if applicable) (Last, First, Middle)

AL Olayan, Lubna, Suliman

CRD Number (if any)

7049129

Effective Date

Termination Date

11/09/2018

Business Address:

Number and Street 1

Level 4, The Gate (East)

City

Dubai

Number and Street 2

PO BOX 506704, DIFC

State

Country

United Arab Emirates

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:

Ms. Lubna Olayan is a director of Safanad Limited, which is the indirect sole-owner of Safanad Inc., which in turn controls Safanad SCP VI Management, LLC.

Individual Name (if applicable) (Last, First, Middle)

Azrack, Joseph, Frederick

CRD Number (if any)

2272339

Effective Date

Termination Date

02/26/2017

Business Address:

Number and Street 1

500 Fifth Ave, 38th Floor

City

New York

Number and Street 2

PO BOX 506704, DIFC

State

New York

Country

United States

ZIP+4/Postal Code

10110

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:

Mr. Joseph Azrack is a director of Safanad Limited, which is the indirect sole-owner of Safanad Inc., which in turn controls Safanad SCP VI Management, LLC.

Individual Name (if applicable) (Last, First, Middle)

Edelman, Martin, Lee

CRD Number (if any)

4606482

Effective Date

Termination Date

01/05/2017

Business Address:

Number and Street 1

Level 4, The Gate (East)

City

Dubai

Number and Street 2

PO BOX 506704, DIFC

State

Country

United Arab Emirates

ZIP+4/Postal Code

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:
SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:
SAFANAD SSCIP VII MANAGEMENT, LLC

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.

You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:
293688

If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

1. Address (do not use a P.O. Box):
☐ Same as the filing adviser.

Number and Street 1:
505 5TH AVENUE
City:
NEW YORK
Number and Street 2:
24TH FLOOR
State:
New York
Country:
United States
ZIP+4/Postal Code:
10017-4902

If this address is a private residence, check this box:

2. Days of week that you normally conduct business at your principal office and place of business:
☐ Monday - Friday
☐ Other:
Normal business hours at this location:
9 AM TO 6 PM

3. Telephone number at this location:
212 468 5600

4. Facsimile number at this location, if any:
212 468 5649

F. Mailing address, if different from your principal office and place of business address:

☐ Same as the filing adviser.

Number and Street 1:

City:

Number and Street 2:

State:

Country:

ZIP+4/Postal Code:

If this address is a private residence, check this box: ☐
SECTION 2 SEC Registration

Responses to this Section help us (and you) determine whether you are eligible to register with the SEC.

A. To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections 2.A.(1) through 2.A.(8), below. Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the relying adviser):

☐ (1) are a large advisory firm that either:
    (a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or
    (b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:
    (a) not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
    (b) not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

    Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

☐ (3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☐ (5) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

☐ (6) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:

    If you check this box, you must make both of the representations below:

    ☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

    ☐ By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

☐ (7) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d);

    If this is your initial filing as a relying adviser, you must make both of these representations:

    ☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

    ☐ The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

    If you are submitting your annual updating amendment, you must make this representation:

    ☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

☐ (8) have received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:

    Application Number: 803- Date of Order:

☐ (9) are no longer eligible to remain registered with the SEC.

SECTION 3 Form of Organization

A. How are you organized?

☐ Corporation

☐ Sole Proprietorship

☐ Limited Liability Partnership (LLP)

☐ Partnership

☐ Limited Liability Company (LLC)

☐ Other

☐ See instructions.
B. In what month does your fiscal year end each year?
DECEMBER

C. Under the laws of what state or country are you organized?
State Delaware
Country United States

If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.

SECTION 4.A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

(1) Section 4.A. asks for information about your direct owners and executive officers.

(2) Direct Owners and Executive Officers. List below the names of:
(a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, director and any other individuals with similar status or functions;
(b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);
(c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;
(d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and
(e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.

(3) Do you have any indirect owners to be reported on Section 4.B. below?  Yes  No

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.

(5) Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are:
NA - less than 5%
B - 10% but less than 25%
C - 25% but less than 50%
D - 50% but less than 75%
E - 75% or more

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.
(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)</th>
<th>DE/FE/I</th>
<th>Title or Status</th>
<th>Date Title or Status Acquired MM/YYYY</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No.</th>
<th>If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENN, JOHN, MARK</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CFO</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6363160</td>
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<tr>
<td>DANNANOUI, Ziad, Mohamad Hussein</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC.</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6774633</td>
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<tr>
<td>JANNAT, Sherwin, Darius</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CHIEF LEGAL OFFICER AND CHIEF COMPLIANCE OFFICER</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
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<tr>
<td>PICA (II), Vincent, Thaddeus</td>
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SECTION 4.B. Indirect Owners

(1) Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners

(2) Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:
(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.
(b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;
BHAMDAN INVESTMENT GROUP

BAHAMDAN, KAMAL, ABDULLAH

BAHAMDAN, MOHANNAD, ABDULLAH

KB GROUP HOLDINGS LTD.

KB GROUP HOLDINGS LTD.

MB HOLDINGS LIMITED

SAFANAD CORPORATE HOLDINGS LIMITED

SAFANAD LIMITED

ﬁ

SECTION 4.C. Control Persons

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

Individual Name (if applicable) (Last, First, Middle)

ABU ALNASR, ABDULKAREEM

CRD Number (if any)

6917944

Effective Date Termination Date

01/18/2015

Business Address:

Number and Street 1 Number and Street 2

LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC

City State Country ZIP+4/Postal Code

DUBAI

If this address is a private residence, check this box:  

Briefly describe the nature of the control:

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SAFANAD SSCIP LLC, WHICH IN TURN CONTROLS MB HOLDINGS LIMITED, WHICH IN TURN CONTROLS SAFANAD CORPORATE HOLDINGS LIMITED, WHICH IN TURN CONTROLS SAFANAD LIMITED. MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SAFANAD SSCIP LLC, WHICH IN TURN CONTROLS MB HOLDINGS LIMITED, WHICH IN TURN CONTROLS SAFANAD CORPORATE HOLDINGS LIMITED, WHICH IN TURN CONTROLS SAFANAD LIMITED.
### SAFANAD SSCIP VII MANAGEMENT, LLC.

**Individual Name (if applicable) (Last, First, Middle)**

**AL OLAYAN, LUBNA, SULIMAN**

**CRD Number (if any)**

7049129

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<tbody>
<tr>
<td>DUBAI</td>
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<td>United Arab Emirates</td>
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</table>

If this address is a private residence, check this box: ☐

**Briefly describe the nature of the control:**

**MS. LUBNA OLAYAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SAFANAD SSCIP VII MANAGEMENT, LLC.**

---

**Individual Name (if applicable) (Last, First, Middle)**

**AZRACK, JOSEPH, FREDERICK**

**CRD Number (if any)**

2272339

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If this address is a private residence, check this box: ☐

**Briefly describe the nature of the control:**

**MR. JOSEPH AZRACK IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SAFANAD SSCIP VII MANAGEMENT, LLC.**

---

**Individual Name (if applicable) (Last, First, Middle)**

**BAHAMDAN, ABDULLAH, SALEM**

**CRD Number (if any)**

6917937

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If this address is a private residence, check this box: ☐

**Briefly describe the nature of the control:**

**MR. ABDULLAH SALEM BAHAMDAN IS A DIRECTOR OF SAFANAD LIMITED (WHICH IS THE INDIRECT SOLE-OWNERS OF SAFANAD INC.)**
<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th>CRD Number (if any)</th>
<th>Effective Date</th>
<th>Termination Date</th>
<th>Business Address:</th>
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<td>06/03/2009</td>
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<td></td>
<td>LEVEL 4, THE GATE (EAST)</td>
<td>PO BOX 506704, DIFC</td>
<td>DUBAI</td>
<td>United Arab Emirates</td>
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<tr>
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<tr>
<td>MR. KAMAL ABDULLAH BAHAMDAN IS THE CHIEF EXECUTIVE OFFICER OF SAFANAD LIMITED (WHICH IS THE INDIRECT OWNER OF SAFANAD INC.)</td>
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<tr>
<td>BENN, JOHN, MARK</td>
<td>6363160</td>
<td>01/26/2018</td>
<td></td>
<td></td>
<td>LEVEL 4, THE GATE (EAST)</td>
<td>PO BOX 506704, DIFC</td>
<td>DUBAI</td>
<td>United Arab Emirates</td>
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<tr>
<td>MR. JOHN MARK BENN IS THE CHIEF FINANCIAL OFFICER OF SAFANAD LIMITED (WHICH IS INDIRECT SOLE-OWNER OF SAFANAD INC.)</td>
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<tr>
<td>DANNAOUI, ZIAD, MOHAMAD HUSSEIN</td>
<td>6774633</td>
<td>07/01/2016</td>
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<td>LEVEL 4, THE GATE (EAST)</td>
<td>PO BOX 506704, DIFC</td>
<td>DUBAI</td>
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<tr>
<td>MR. ZIAD DANNAOUI IS THE PRESIDENT OF SAFANAD LIMITED (WHICH IS THE INDIRECT OWNER OF SAFANAD INC.)</td>
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<tr>
<td>EDELMAN, MARTIN, LEE</td>
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</table>
**SECTION 1 Identifying Information**

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:
   SAFANAD SSCIP VIII MANAGEMENT, LLC

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.
   No Information Filed

You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:
   293689
   No Information Filed

If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

1. Address (do not use a P.O. Box):
   - ☑ Same as the filing adviser.
   
   Number and Street 1: 505 5TH AVENUE
   Number and Street 2: 24TH FLOOR
   City: NEW YORK
   State: New York
   Country: United States
   ZIP+4: 10017-4902

   If this address is a private residence, check this box: ☐

2. Days of week that you normally conduct business at your principal office and place of business:
   - ☑ Monday - Friday
   - ☑ Other:

Normal business hours at this location:
9 AM TO 6 PM
A. To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections 2.A.(1) through 2.A.(8), below. Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the relying adviser):

☐ (1) are a large advisory firm that either:

  (a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or
  (b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:

  (a) not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
  (b) not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

  Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

☐ (3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☐ (5) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

☐ (6) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:

  If you check this box, you must make both of the representations below:

  ☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

  ☐ By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

☐ (7) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d);

  If this is your initial filing as a relying adviser, you must make both of these representations:

  ☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

  ☐ The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

  If you are submitting your annual updating amendment, you must make this representation:

  ☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.
SECTION 3 Form of Organization

A. How are you organized?
- Corporation
- Sole Proprietorship
- Limited Liability Partnership (LLP)
- Partnership
- Limited Liability Company (LLC)
- Limited Partnership (LP)
- Other (specify):

B. In what month does your fiscal year end each year?
- DECEMBER

C. Under the laws of what state or country are you organized?
- State: Delaware
- Country: United States

If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.

SECTION 4.A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

1. Section 4.A. asks for information about your direct owners and executive officers.
2. Direct Owners and Executive Officers. List below the names of:
   (a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, director and any other individuals with similar status or functions;
   (b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);
   (c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;
   (d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and
   (e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.
3. Do you have any indirect owners to be reported on Section 4.B. below?  Yes  No
4. In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.
5. Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).
6. Ownership codes are:  NA - less than 5%  B - 10% but less than 25%  D - 50% but less than 75%
   A - 5% but less than 10%  C - 25% but less than 50%  E - 75% or more
7. (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.
   Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.
   (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.
8. Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, you will be able to manually edit the information after it is pre-filled and before you submit your filing.

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<th>FULL LEGAL NAME</th>
<th>DE/FE</th>
<th>Title or Status</th>
<th>Date Title or Status</th>
<th>Ownership Code</th>
<th>Control Person</th>
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<th>CRD No.</th>
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</tbody>
</table>
### SECTION 4.B. Indirect Owners

1. Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners.

2. Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:

   (a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of voting security of that corporation;

   For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, parent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

   (b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;

   (c) in the case of an owner that is a trust, the trust and each trustee; and

   (d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by limited partners, all limited managers.

3. Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

4. In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

5. Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

6. Ownership codes are:

   - C - 25% but less than 50%
   - D - 50% but less than 75%
   - E - 75% or more
   - F - Other (general partner, trustee, or elected manager)

7. (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

   Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

   (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

   (c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)</th>
<th>DEFEI</th>
<th>Status</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>C</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>KB GROUP HOLDINGS LTD.</td>
<td>SOLE SHAREHOLDER</td>
<td>06/2006</td>
<td>E</td>
<td>Y</td>
</tr>
<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>SAFANAD LIMITED</td>
<td>DIRECTOR, CEO</td>
<td>F</td>
<td>Y</td>
<td>N 6363365</td>
</tr>
<tr>
<td>BAHAMDAN, MOHANNAD, ABDULLAH</td>
<td>I</td>
<td>MB HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>03/2015</td>
<td>E</td>
<td>Y</td>
</tr>
<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>C</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
</tr>
<tr>
<td>MB HOLDINGS LIMITED</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
</tr>
<tr>
<td>SAFANAD CORPORATE HOLDINGS LIMITED</td>
<td>FE</td>
<td>SAFANAD INC.</td>
<td>SOLE SHAREHOLDER</td>
<td>02/2013</td>
<td>E</td>
<td>Y</td>
</tr>
<tr>
<td>SAFANAD LIMITED</td>
<td>FE</td>
<td>SAFANAD CORPORATE HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>02/2013</td>
<td>E</td>
<td>Y</td>
</tr>
</tbody>
</table>

### SECTION 4.C. Control Persons

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th>CRD Number (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABU ALNASR, ABDULKAREEM</td>
<td></td>
</tr>
</tbody>
</table>
Complete the Status column by entering the owner's status as partner, trustee, elected director, shareholder, or member; and

CRD Number (if any)
4606482

Effective Date
01/18/2015

Termination Date

Business Address:
Number and Street 1
LEVEL 4, THE GATE (EAST)
City
DUBAI
State
United Arab Emirates
Country

ZIP+4/Postal Code

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SAFANAD SSCIP VIII MANAGEMENT, LLC.

Individual Name (if applicable) (Last, First, Middle)
AL OLAYAN, LUBNA, SULIMAN

CRD Number (if any)
7049129

Effective Date
11/09/2018

Termination Date

Business Address:
Number and Street 1
LEVEL 4, THE GATE (EAST)
City
DUBAI
State
United Arab Emirates
Country

ZIP+4/Postal Code

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:

MS. LUBNA OLAYAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SAFANAD SSCIP VIII MANAGEMENT, LLC.

Individual Name (if applicable) (Last, First, Middle)
AZRACK, JOSEPH, FREDERICK

CRD Number (if any)
2272339

Effective Date
02/26/2017

Termination Date

Business Address:
Number and Street 1
500 FIFTH AVE, 38TH FLOOR
City
NEW YORK
State
New York
Country
United States

ZIP+4/Postal Code
10110

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:

MR. JOSEPH AZRACK IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SAFANAD SSCIP VIII MANAGEMENT, LLC.

Individual Name (if applicable) (Last, First, Middle)
EDELMAN, MARTIN, LEE

CRD Number (if any)
4606482
SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:
SSHIP I MANAGEMENT LLC

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.

No Information Filed

You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:
293690

No Information Filed

If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

(1) Address (do not use a P.O. Box):

☑ Same as the filing adviser.

Number and Street 1: 505 5TH AVENUE
Number and Street 2: 24TH FLOOR

If this address is a private residence, check this box:

(2) Days of week that you normally conduct business at your principal office and place of business:

☑ Monday - Friday ☐ Other:

Normal business hours at this location:
9 AM TO 6 PM

(3) Telephone number at this location:
212 468 5600
F. Mailing address, if different from your principal office and place of business address:

Check Same as the filing adviser.

Number and Street 1: _________________________________
City: __________________________ State: __________
Number and Street 2: _________________________________
Country: __________________________ ZIP+4/Postal Code: __________

If this address is a private residence, check this box: ☐

G. Provide your Legal Entity Identifier if you have one:

A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.

H. If you have Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:

No Information Filed

SECTION 2 SEC Registration

Responses to this Section help us (and you) determine whether you are eligible to register with the SEC.

A. To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections 2.A.(1) through 2.A.(8), below. Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items.

You (the relying adviser):

☐ (1) are a large advisory firm that either:

(a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or

(b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:

(a) not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or

(b) not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

☐ (3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☐ (5) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

☐ (6) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:

If you check this box, you must make both of the representations below:

☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

☐ By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

☐ (7) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d);

If this is your initial filing as a relying adviser, you must make both of these representations:

☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

☐ The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

If you are submitting your annual updating amendment, you must make this representation:

☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

☐ (8) have received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:
SECTION 3 Form of Organization

A. How are you organized?
   - Corporation
   - Sole Proprietorship
   - Limited Liability Partnership (LLP)
   - Partnership
   - Limited Liability Company (LLC)
   - Limited Partnership (LP)
   - Other (specify):

B. In what month does your fiscal year end each year?
   DECEMBER

C. Under the laws of what state or country are you organized?
   - State
   - Country
   Delaware United States

If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.

SECTION 4.A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

1. Section 4.A. asks for information about your direct owners and executive officers.
2. Direct Owners and Executive Officers. List below the names of:
   (a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, director and any other individuals with similar status or functions;
   (b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);
      Direct owners include any person that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Section 4.A., a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.
   (c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;
   (d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and
   (e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.

3. Do you have any indirect owners to be reported on Section 4.B. below?  Yes No

4. In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.

5. Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

6. Ownership codes are: NA - less than 5% B - 10% but less than 25% D - 50% but less than 75%
   A - 5% but less than 10% C - 25% but less than 50% E - 75% or more

7. (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.
   Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.
   (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)</th>
<th>DEFEI</th>
<th>Title or Status</th>
<th>Date Title or Status Acquired MM/YYYY</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No.</th>
<th>If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENN, JOHN, MARK</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CFO</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6363160</td>
<td></td>
</tr>
<tr>
<td>DANNAOUI, ZIAD, MOHAMAD HUSSEIN</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC.</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6774633</td>
<td></td>
</tr>
<tr>
<td>JANNAT, SHERWIN, DARIUS</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CHIEF LEGAL OFFICER AND CHIEF COMPLIANCE OFFICER</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6583990</td>
<td></td>
</tr>
<tr>
<td>PICA (II), VINCENT,</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND PRESIDENT</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>1500485</td>
<td></td>
</tr>
</tbody>
</table>
## SECTION 4.B. Indirect Owners

1. Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners.

2. Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:

   a. in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of voting security of that corporation;

   b. in the case of an owner that is a partnership, all general partners and those limited and special partners that the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;

   c. in the case of an owner that is a trust, the trust and each trustee; and

   d. in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.

3. Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

4. In the DE/FE/ column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

5. Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

6. Ownership codes are:  
   - C - 25% but less than 50%  
   - D - 50% but less than 75%  
   - E - 75% or more  
   - F - Other (general partner, trustee, or elected manager)

7. (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control. Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

   (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

   (c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

### FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)  |  DE/FEI  | Entity in Which Interest is Owned  | Status  | Date Status Acquired MM/YYYY  | Ownership Code  | Control Person  | PR  | CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.
---|---|---|---|---|---|---|---|---|---
BAHAMAN INVESTMENT GROUP | FE | SAFANAD LIMITED | SHAREHOLDER | 07/2009 | C | Y | N | 86363365  
BAHAMAN, KAMAL, ABDULLAH | I | KB GROUP HOLDINGS LTD. | SOLE SHAREHOLDER | 08/2007 | E | Y | N | 86363365  
BAHAMAN, KAMAL, ABDULLAH | I | SAFANAD LIMITED | DIRECTOR, CEO | 06/2009 | F | Y | N | 7236884  
BAHAMAN, MOHAMMAD, ABDULLAH | I | MB HOLDINGS LIMITED | SOLE SHAREHOLDER | 03/2015 | E | Y | N | 86363365  
KB GROUP HOLDINGS LTD. | FE | SAFANAD LIMITED | SHAREHOLDER | 06/2009 | C | Y | N | 86363365  
KB GROUP HOLDINGS LTD. | FE | BAHAMAN INVESTMENT GROUP | MEMBER | 02/2020 | C | Y | N | 86363365  
MB HOLDINGS LIMITED | FE | BAHAMAN INVESTMENT GROUP | MEMBER | 02/2020 | C | Y | N | 86363365  
SAFANAD CORPORATE HOLDINGS LIMITED | FE | SAFANAD INC. | SOLE SHAREHOLDER | 02/2013 | E | Y | N | 86363365  
SAFANAD LIMITED | FE | SAFANAD CORPORATE HOLDINGS LIMITED | SOLE SHAREHOLDER | 02/2013 | E | Y | N | 86363365

## SECTION 4.C. Control Persons

**C.** Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

### Individual Name (if applicable) (Last, First, Middle)

ABU ALNASR, ABDULKAREEM

### CRD Number (if any)

6917944
Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or (Last, First, Middle)

EDELMAN, MARTIN, LEE

CRD Number (if any)

4606482

Effective Date Termination Date

01/18/2015

Business Address:

Number and Street 1 number and Street 2
LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code

DUBAI United Arab Emirates

If this address is a private residence, check this box:

Briefly describe the nature of the control:

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP I MANAGEMENT LLC.

Individual Name (if applicable) (Last, First, Middle)

AL OLAYAN, LUBNA, SULIMAN

CRD Number (if any)

7049129

Effective Date Termination Date

11/09/2018

Business Address:

Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code

DUBAI United Arab Emirates

If this address is a private residence, check this box:

Briefly describe the nature of the control:

MS. LUBNA OLAYAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP I MANAGEMENT LLC.

Individual Name (if applicable) (Last, First, Middle)

AZRACK, JOSEPH, FREDERICK

CRD Number (if any)

2272339

Effective Date Termination Date

02/26/2017

Business Address:

Number and Street 1 Number and Street 2
500 FIFTH AVE, 38TH FLOOR PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code

NEW YORK New York United States 10110

If this address is a private residence, check this box:

Briefly describe the nature of the control:

MR. JOSEPH AZRACK IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP I MANAGEMENT LLC.

Individual Name (if applicable) (Last, First, Middle)

EDELMAN, MARTIN, LEE

CRD Number (if any)

4606482

Effective Date Termination Date

01/01/2015

Business Address:

Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code

DUBAI United Arab Emirates

If this address is a private residence, check this box:

Briefly describe the nature of the control:

MR. MARTIN EDELMAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP I MANAGEMENT LLC.

Individual Name (if applicable) (Last, First, Middle)

F. SAFANAD CORPORATE

CRD Number (if any)

7236884

Effective Date Termination Date

01/01/2015

Business Address:

Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code

DUBAI United Arab Emirates

If this address is a private residence, check this box:

Briefly describe the nature of the control:

MS. LUBNA OLAYAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP I MANAGEMENT LLC.
SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:

SSHIP II MANAGEMENT LLC

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.

No Information Filed

You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:

293691

No Information Filed

If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

(1) Address (do not use a P.O. Box):

☐ Same as the filing adviser.

Number and Street 1: 505 5TH AVENUE
Number and Street 2: 24TH FLOOR
City: NEW YORK
State: New York
Country: United States
ZIP+4/Postal Code: 10017-4902

If this address is a private residence, check this box: ☐

(2) Days of week that you normally conduct business at your principal office and place of business:

☐ Monday - Friday  ☐ Other:

Normal business hours at this location:
9 AM TO 6 PM

(3) Telephone number at this location:

212 468 5600

(4) Facsimile number at this location, if any:

No Information Filed
F. Mailing address, if different from your principal office and place of business address:

☑ Same as the filing adviser.

Number and Street 1: Number and Street 2: 
City: State: Country: ZIP+4/Postal Code: 

If this address is a private residence, check this box: ☐

G. Provide your Legal Entity Identifier if you have one:

A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.

H. If you have Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:

No Information Filed

SECTION 2 SEC Registration

Responses to this Section help us (and you) determine whether you are eligible to register with the SEC.

A. To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections 2.A.(1) through 2.A.(8), below. Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items. You (the relying adviser):

☐ (1) are a large advisory firm that either:

(a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or

(b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:

(a) not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or

(b) not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

(3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☐ (5) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

☐ (6) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:

If you check this box, you must make both of the representations below:

☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

☐ By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

☐ (7) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d);

If this is your initial filing as a relying adviser, you must make both of these representations:

☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

☐ The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

If you are submitting your annual updating amendment, you must make this representation:

☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

☐ (8) have received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:

Application Number: 803- Date of Order:
SECTION 3 Form of Organization

A. How are you organized?
- Corporation
- Sole Proprietorship
- Limited Liability Partnership (LLP)
- Partnership
- Limited Liability Company (LLC)
- Limited Partnership (LP)
- Other (specify):

B. In what month does your fiscal year end each year?
DECEMBER

C. Under the laws of what state or country are you organized?
State: Delaware
Country: United States

If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.

SECTION 4A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

1. Section 4A asks for information about your direct owners and executive officers.
2. Direct Owners and Executive Officers. List below the names of:
   (a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, director and any other individuals with similar status or functions;
   (b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);
      Direct owners include any person that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 5% or more of a class of your voting securities. For purposes of this Section 4.A., a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.
   (c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital;
   (d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and
   (e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.
3. Do you have any indirect owners to be reported on Section 4.B. below?  ☐ Yes ☐ No
4. In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.
5. Complete the Title or Status column by entering board/management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, member, or for shareholders or members, the class of securities owned (if more than one is issued).
6. Ownership codes are:
   - NA - less than 5%
   - B - 10% but less than 25%
   - D - 25% but less than 50%
   - E - 75% or more
7. (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.
   Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.
   (b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.
   (c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME</th>
<th>DE/FE/I</th>
<th>Title or Status</th>
<th>Date Title or Status Acquired</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENN, JOHN, MARK</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CFO</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6363160</td>
</tr>
<tr>
<td>DANNAOULI, ZIAD, MOHAMAD HUSSEIN</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC.</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6774633</td>
</tr>
<tr>
<td>JANNAT, SHERWIN, DARIUS</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CHIEF LEGAL OFFICER</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6583990</td>
</tr>
<tr>
<td>PICA (II), VINCENT, THADDEUS</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND PRESIDENT</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>1500485</td>
</tr>
</tbody>
</table>
SECTION 4.B. Indirect Owners

(1) Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners.

(2) Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:

(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;

(c) in the case of an owner that is a trust, the trust and each trustee; and

(d) in the case of an owner that is a limited liability company ("LLC"). (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.

(3) Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

(5) Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are: C - 25% but less than 50% E - 75% or more

D - 50% but less than 75% F - Other (general partner, trustee, or elected manager)

(7) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

### FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name) | DE/FE/I | Entity in Which Interest is Owned | Status | Date Status Acquired MMYYYY | Ownership Code | Control Person | PR | CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No. |
--- | --- | --- | --- | --- | --- | --- | --- | --- |
BAHAMDAN INVESTMENT GROUP | FE | SAFANAD LIMITED | SHAREHOLDER | 07/2009 | C | Y | N |
BAHAMDAN, KAMAL, ABDULLAH | I | KB GROUP HOLDINGS LTD. | SOLE SHAREHOLDER | 06/2006 | E | Y | N 6363365 |
BAHAMDAN, MOHANNAD, ABDULLAH | I | SAFANAD LIMITED | DIRECTOR, CEO | 06/2009 | F | Y | N 6363365 |
BAHAMDAN, MOHANNAD, ABDULLAH | I | MB HOLDINGS LIMITED | SOLE SHAREHOLDER | 03/2015 | C | Y | N 7236884 |
KB GROUP HOLDINGS LTD. | FE | SAFANAD LIMITED | SHAREHOLDER | 06/2009 | C | Y | N |
KB GROUP HOLDINGS LTD. | FE | BAHAMDAN INVESTMENT GROUP | MEMBER | 02/2020 | C | Y | N |
MB HOLDINGS LIMITED | FE | BAHAMDAN INVESTMENT GROUP | MEMBER | 02/2020 | C | Y | N |
SAFANAD CORPORATE HOLDINGS LIMITED | FE | SAFANAD INC. | SOLE SHAREHOLDER | 02/2013 | E | Y | N |
SAFANAD LIMITED | FE | SAFANAD CORPORATE HOLDINGS LIMITED | SHAREHOLDER | 02/2013 | F | Y | N |

SECTION 4.C. Control Persons

Yes No

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

Individual Name (if applicable) (Last, First, Middle)
ABU ALNASR, ABDULKAREEM

CRD Number (if any)
6917944

Effective Date
Termination Date
Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of ownership.

<table>
<thead>
<tr>
<th>Name</th>
<th>Status</th>
<th>CRD Number (if any)</th>
<th>Effective Date</th>
<th>Termination Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDELMAN, MARTIN, LEE</td>
<td></td>
<td>4606482</td>
<td>01/05/2018</td>
<td></td>
</tr>
</tbody>
</table>

If this address is a private residence, check this box: ☒

Briefly describe the nature of the control:

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP II MANAGEMENT LLC.

<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th>Business Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>AL OLAYAN, LUBNA, SULIMAN</td>
<td></td>
</tr>
<tr>
<td>CRD Number (if any)</td>
<td></td>
</tr>
<tr>
<td>7049129</td>
<td></td>
</tr>
</tbody>
</table>

Effective Date: 11/09/2018  
Termination Date:  

Briefly describe the nature of the control:

MS. LUBNA OLAYAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP II MANAGEMENT LLC.

<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th>Business Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>AZRACK, JOSEPH, FREDERICK</td>
<td></td>
</tr>
<tr>
<td>CRD Number (if any)</td>
<td></td>
</tr>
<tr>
<td>2272339</td>
<td></td>
</tr>
</tbody>
</table>

Effective Date: 02/26/2017  
Termination Date:  

Briefly describe the nature of the control:

MR. JOSEPH AZRACK IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP II MANAGEMENT LLC.

<table>
<thead>
<tr>
<th>Individual Name (if applicable) (Last, First, Middle)</th>
<th>Business Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDELMAN, MARTIN, LEE</td>
<td></td>
</tr>
<tr>
<td>CRD Number (if any)</td>
<td></td>
</tr>
<tr>
<td>4606482</td>
<td></td>
</tr>
</tbody>
</table>

Effective Date: 01/05/2018  
Termination Date:  

Briefly describe the nature of the control:

MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP II MANAGEMENT LLC.
Business Address:
Number and Street 1: Number and Street 2
LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC
City State Country
DUBAI
United Arab Emirates

If this address is a private residence, check this box: ☐

Briefly describe the nature of the control:
MR. MARTIN EDELMAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP II MANAGEMENT LLC.

SECTION 1 Identifying Information

Responses to this Section tell us who you (the relying adviser) are, where you are doing business, and how we can contact you.

A. Your full legal name:
SSHIDIP I MANAGEMENT LLC

B. Name under which you primarily conduct your advisory business, if different from Section 1.A. above or Item 1.A. of the filing adviser's Form ADV Part 1A.

C. List any other business names and the jurisdictions in which you use them. Complete this question for each other business name.

No Information Filed

You do not have to include the names or jurisdictions of the filing adviser or other relying adviser(s) in response to this Section 1.C.

D. If you currently have, or ever had, a number ("CRD Number") assigned by the FINRA's CRD system or by the IARD system (other than the filing adviser's CRD number), your CRD number:

293692

No Information Filed

If you do not have a CRD number, skip this Section 1.D. Do not provide the CRD number of one of your officers, employees, or affiliates (including the filing adviser).

E. Principal Office and Place of Business

(1) Address (do not use a P.O. Box):
☐ Same as the filing adviser.

Number and Street 1: Number and Street 2:
505 5TH AVENUE 24TH FLOOR
City: State: Country: ZIP+4/Postal Code:
NEW YORK New York United States 10017-4902

If this address is a private residence, check this box: ☐

(2) Days of week that you normally conduct business at your principal office and place of business:
☐ Monday - Friday ☐ Other:
Normal business hours at this location:
9 AM TO 6 PM

(3) Telephone number at this location:
212 468 5600

(4) Facsimile number at this location, if any:
212 468 5649
F. Mailing address, if different from your principal office and place of business address:

☐ Same as the filing adviser.

Number and Street 1: Number and Street 2:  
City: State: Country: ZIP+4/Postal Code:  
If this address is a private residence, check this box: ☐

G. Provide your Legal Entity Identifier if you have one:

A legal entity identifier is a unique number that companies use to identify each other in the financial marketplace. You may not have a legal entity identifier.

H. If you have Central Index Key numbers assigned by the SEC ("CIK Numbers"), all of your CIK numbers:

No Information Filed

SECTION 2 SEC Registration

Responses to this Section help us (and you) determine whether you are eligible to register with the SEC.

A. To be a relying adviser, you must be independently eligible to register (or remain registered) with the SEC. You must check at least one of the Sections 2.A.(1) through 2.A. (8), below. Part 1A Instruction 2 provides information to help you determine whether you may affirmatively respond to each of these items. You (the relying adviser):

☐ (1) are a large advisory firm that either:

(a) has regulatory assets under management of $100 million (in U.S. dollars) or more; or
(b) has regulatory assets under management of $90 million (in U.S. dollars) or more at the time of filing its most recent annual updating amendment and is registered with the SEC;

☐ (2) are a mid-sized advisory firm that has regulatory assets under management of $25 million (in U.S. dollars) or more but less than $100 million (in U.S. dollars) and you are either:

(a) not required to be registered as an adviser with the state securities authority of the state where you maintain your principal office and place of business; or
(b) not subject to examination by the state securities authority of the state where you maintain your principal office and place of business;

Click HERE for a list of states in which an investment adviser, if registered, would not be subject to examination by the state securities authority.

(3) Reserved

☐ (4) have your principal office and place of business outside the United States;

☐ (5) are a related adviser under rule 203A-2(b) that controls, is controlled by, or is under common control with, an investment adviser that is registered with the SEC, and your principal office and place of business is the same as the registered adviser;

☐ (6) are an adviser relying on rule 203A-2(c) because you expect to be eligible for SEC registration within 120 days:

If you check this box, you must make both of the representations below:

☐ I am not registered or required to be registered with the SEC or a state securities authority and I have a reasonable expectation that I will be eligible to register with the SEC within 120 days after the date my registration with the SEC becomes effective.

☐ By submitting this Form ADV to the SEC, the filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, on the 120th day after this application for umbrella registration with the SEC becomes effective, I would be prohibited by Section 203A(a) of the Advisers Act from registering with the SEC.

☐ (7) are a multi-state adviser that is required to register in 15 or more states and is relying on rule 203A-2(d);

If this is your initial filing as a relying adviser, you must make both of these representations:

☐ I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of 15 or more states to register as an investment adviser with the state securities authorities in those states.

☐ The filing adviser undertakes to file an amendment to this umbrella registration to remove this Schedule R if, at the time of the annual updating amendment, I would be required by the laws of fewer than 15 states to register as an investment adviser with the state securities authorities of those states.

If you are submitting your annual updating amendment, you must make this representation:

☐ Within 90 days prior to the date of filing this amendment, I have reviewed the applicable state and federal laws and have concluded that I am required by the laws of at least 15 states to register as an investment adviser with the state securities authorities in those states.

☐ (8) have received an SEC Order exempting you from the prohibition against registration with the SEC. If you check this box, provide the following information:

Application Number: 803- Date of Order:

☐ (9) are no longer eligible to remain registered with the SEC.
SECTION 3 Form of Organization
A. How are you organized?
   - Corporation
   - Sole Proprietorship
   - Limited Liability Partnership (LLP)
   - Partnership
   - Limited Liability Company (LLC)
   - Limited Partnership (LP)
   - Other (specify):

B. In what month does your fiscal year end each year?
   - DECEMBER

C. Under the laws of what state or country are you organized?
   - State
   - Country
   - Delaware United States

   If you are a partnership, provide the name of the state or country under whose laws your partnership was formed.

SECTION 4.A. Direct Owners and Executive Officers

In this Section 4, we ask you to identify each other person that, directly or indirectly, controls you.

(1) Section 4.A. asks for information about your direct owners and executive officers.

(2) Direct Owners and Executive Officers. List below the names of:
   - (a) each Chief Executive Officer, Chief Financial Officer, Chief Operations Officer, Chief Legal Officer, director and any other individuals with similar status or functions;
   - (b) if you are organized as a corporation, each shareholder that is a direct owner of 5% or more of a class of your voting securities, unless you are a public reporting company (a company subject to Section 12 or 15(d) of the Exchange Act);
   - (c) if you are organized as a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 5% or more of your capital; and
   - (d) in the case of a trust that directly owns 5% or more of a class of your voting securities, or that has the right to receive upon dissolution, or has contributed, 5% or more of your capital, the trust and each trustee; and
   - (e) if you are organized as a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 5% or more of your capital, and (ii) if managed by elected managers, all elected managers.

(3) Do you have any indirect owners to be reported on Section 4.B. below?  
   - Yes
   - No

(4) In the DE/FEI column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner or executive officer is an individual.

(5) Complete the Title or Status column by entering board-management titles; status as partner, trustee, sole proprietor, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are:
   - NA - less than 5%
   - A - 5% but less than 10%
   - B - 10% but less than 25%
   - C - 25% but less than 50%
   - D - 50% but less than 75%
   - E - 75% or more

(7) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

   Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

   Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME</th>
<th>DE/FEI</th>
<th>Title or Status</th>
<th>Date Title or Status Acquired</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>PR</th>
<th>CRD No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENN, JOHN, MARK</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CFO</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6363160</td>
</tr>
<tr>
<td>DANNAOUI, ZIAD, MOHAMAD HUSSEIN</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC.</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6774633</td>
</tr>
<tr>
<td>JANNAT, SHERWIN, DARIUS</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND CHIEF LEGAL OFFICER AND CHIEF COMPLIANCE OFFICER</td>
<td>06/2017</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>6583990</td>
</tr>
<tr>
<td>PICA (II), VINCENT, THADDEUS</td>
<td>I</td>
<td>DIRECTOR OF SAFANAD, INC. AND PRESIDENT</td>
<td>03/2014</td>
<td>NA</td>
<td>Y</td>
<td>N</td>
<td>1500485</td>
</tr>
<tr>
<td>SAFANAD INC.</td>
<td>DE</td>
<td>SOLE SHAREHOLDER</td>
<td>03/2016</td>
<td>E</td>
<td>Y</td>
<td>N</td>
<td>170969</td>
</tr>
</tbody>
</table>
**SECTION 4.B. Indirect Owners**

(1) Section 4.B. asks for information about your indirect owners; you must first complete Section 4.A., which asks for information about your direct owners.

(2) Indirect Owners. With respect to each owner listed in Section 4.A. (except individual owners), list below:

(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation;

For purposes of this Section, a person beneficially owns any securities: (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant, or right to purchase the security.

(b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;

(c) in the case of an owner that is a trust, the trust and each trustee; and

(d) in the case of an owner that is a limited liability company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC’s capital, and (ii) if managed by elected managers, all elected managers.

(3) Continue up the chain of ownership listing all 25% owners at each level. Once a public reporting company (a company subject to Sections 12 or 15(d) of the Exchange Act) is reached, no further ownership information need be given.

(4) In the DE/FE/I column below, enter "DE" if the owner is a domestic entity, "FE" if the owner is an entity incorporated or domiciled in a foreign country, or "I" if the owner is an individual.

(5) Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and for shareholders or members, the class of securities owned (if more than one is issued).

(6) Ownership codes are: C - 25% but less than 50%  E - 75% or more  D - 50% but less than 75%  F - Other (general partner, trustee, or elected manager)

(7) (a) In the Control Person column, enter "Yes" if the person has control as defined in the Glossary of Terms to Form ADV, and enter "No" if the person does not have control.

Note that under this definition, most executive officers and all 25% owners, general partners, elected managers, and trustees are control persons.

(b) In the PR column, enter "PR" if the owner is a public reporting company under Sections 12 or 15(d) of the Exchange Act.

(c) Complete each column.

Check this box if you are filing this Form ADV through the IARD system and want the IARD system to pre-fill Schedule B with the same indirect owners you have provided in Schedule B for your filing adviser. If you check the box, the system will pre-fill these fields for you, but you will be able to manually edit the information after it is pre-filled and before you submit your filing.

<table>
<thead>
<tr>
<th>FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)</th>
<th>DE/FE/I</th>
<th>Entity in Which Interest is Owned</th>
<th>Status</th>
<th>Date Status Acquired MM/YYYY</th>
<th>Ownership Code</th>
<th>Control Person</th>
<th>CRD No. If None: S.S. No. and Date of Birth, IRS Tax No. or Employer ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>07/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>KB GROUP HOLDINGS LTD.</td>
<td>SOLE SHAREHOLDER</td>
<td>06/2006</td>
<td>E</td>
<td>Y</td>
<td>N 6363385</td>
</tr>
<tr>
<td>BAHAMDAN, KAMAL, ABDULLAH</td>
<td>I</td>
<td>SAFANAD LIMITED</td>
<td>DIRECTOR, CEO</td>
<td>06/2009</td>
<td>F</td>
<td>Y</td>
<td>N 6363385</td>
</tr>
<tr>
<td>BAHAMDAN, MOHAMMAD, ABDULLAH</td>
<td>I</td>
<td>MB HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>03/2015</td>
<td>E</td>
<td>Y</td>
<td>N 7236884</td>
</tr>
<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>SAFANAD LIMITED</td>
<td>SHAREHOLDER</td>
<td>06/2009</td>
<td>C</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>KB GROUP HOLDINGS LTD.</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>MB HOLDINGS LIMITED</td>
<td>FE</td>
<td>BAHAMDAN INVESTMENT GROUP</td>
<td>MEMBER</td>
<td>02/2020</td>
<td>C</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>SAFANAD CORPORATE HOLDINGS LIMITED</td>
<td>FE</td>
<td>SAFANAD INC.</td>
<td>SOLE SHAREHOLDER</td>
<td>02/2013</td>
<td>E</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>SAFANAD LIMITED</td>
<td>FE</td>
<td>SAFANAD CORPORATE HOLDINGS LIMITED</td>
<td>SOLE SHAREHOLDER</td>
<td>02/2013</td>
<td>E</td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

**SECTION 4.C. Control Persons**

Yes ☐ No ☐

C. Does any person not named in Section 1.A., Section 4.A., or Section 4.B. directly or indirectly, control your management or policies?

If yes, you must complete the information below for each control person not named in Section 1.A., Section 4.A., or Section 4.B. that directly or indirectly controls your management or policies.

Individual Name (if applicable) (Last, First, Middle)
ABU ALNASR, ABDULKAREEM

CRD Number (if any)
6917944

Effective Date 01/18/2015
Termination Date
Complete the Status column by entering the owner's status as partner, trustee, elected manager, shareholder, or member; and is subject to examination by the SEC in those states.

If this address is a private residence, check this box.

Briefly describe the nature of the control:
MR. ABDULKAREEM ABU ALNASR IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHDIP I MANAGEMENT LLC.

Individual Name (if applicable) (Last, First, Middle)
AL OLAYAN, LUBNA, SULIMAN

CRD Number (if any)
7049129

Effective Date Termination Date
11/09/2018

Business Address:
Number and Street 1 Number and Street 2
LEVEL 4, THE GATE (EAST) PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code
DUBAI State Country United Arab Emirates

If this address is a private residence, check this box.

Briefly describe the nature of the control:
MS. LUBNA OLAYAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHDIP I MANAGEMENT LLC.

Individual Name (if applicable) (Last, First, Middle)
AZRACK, JOSEPH, FREDERICK

CRD Number (if any)
2272339

Effective Date Termination Date
02/26/2017

Business Address:
Number and Street 1 Number and Street 2
500 FIFTH AVE, 38TH FLOOR PO BOX 506704, DIFC
City State Country ZIP+4/Postal Code
NEW YORK New York United States 10110

If this address is a private residence, check this box.

Briefly describe the nature of the control:
MR. JOSEPH AZRACK IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHDIP I MANAGEMENT LLC.

Individual Name (if applicable) (Last, First, Middle)
EDELMAN, MARTIN, LEE

CRD Number (if any)
4606482

Effective Date Termination Date
01/05/2017

Business Address:
If this address is a private residence, check this box:

Briefly describe the nature of the control:

MR. MARTIN EDELMAN IS A DIRECTOR OF SAFANAD LIMITED, WHICH IS THE INDIRECT SOLE-OWNER OF SAFANAD INC., WHICH IN TURN CONTROLS SSHIP I MANAGEMENT LLC.

SECTION 4.D. Control Persons - Public Reporting Companies

No Information Filed

DRP Pages

CRIMINAL DISCLOSURE REPORTING PAGE (ADV)

No Information Filed

REGULATORY ACTION DISCLOSURE REPORTING PAGE (ADV)

No Information Filed

CIVIL JUDICIAL ACTION DISCLOSURE REPORTING PAGE (ADV)

No Information Filed

Part 2

Exemption from brochure delivery requirements for SEC-registered advisers

SEC rules exempt SEC-registered advisers from delivering a firm brochure to some kinds of clients. If these exemptions excuse you from delivering a brochure to all of your advisory clients, you do not have to prepare a brochure.

Are you exempt from delivering a brochure to all of your clients under these rules?

If no, complete the ADV Part 2 filing below.

Amend, retire or file new brochures:

<table>
<thead>
<tr>
<th>Brochure ID</th>
<th>Brochure Name</th>
<th>Brochure Type(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>292515</td>
<td>SAFANAD INC. FORM ADV PART 2A (JUNE 2021)</td>
<td>Private funds or pools</td>
</tr>
</tbody>
</table>

Part 3

<table>
<thead>
<tr>
<th>CRS</th>
<th>Type(s)</th>
<th>Affiliate Info</th>
<th>Retire</th>
</tr>
</thead>
</table>

There are no CRS filings to display.

Execution Pages

DOMESTIC INVESTMENT ADVISER EXECUTION PAGE

You must complete the following Execution Page to Form ADV. This execution page must be signed and attached to your initial submission of Form ADV to the SEC and all amendments.

Appointment of Agent for Service of Process

By signing this Form ADV Execution Page, you, the undersigned adviser, irrevocably appoint the Secretary of State or other legally designated officer, of the state in which you
I, the undersigned, sign this Form ADV on behalf of, and with the authority of, the investment adviser. The investment adviser and I both certify, under penalty of perjury under the laws of the United States of America, that the information and statements made in this ADV, including exhibits and any other information submitted, are true and correct, and that I am signing this Form ADV Execution Page as a free and voluntary act.

I certify that the adviser's books and records will be preserved and available for inspection as required by law. Finally, I authorize any person having custody or possession of these books and records to make them available to federal and state regulatory representatives.

Signature:

Date: MM/DD/YYYY

Printed Name: HASSANALI ANDREW SHAMS VELLANI

Title: CHIEF COMPLIANCE OFFICER 7 CHIEF LEGAL OFFICER

Adviser CRD Number: 170969

NON-RESIDENT INVESTMENT ADVISER EXECUTION PAGE

You must complete the following Execution Page to Form ADV. This execution page must be signed and attached to your initial submission of Form ADV to the SEC and all amendments.

1. Appointment of Agent for Service of Process

By signing this Form ADV Execution Page, you, the undersigned adviser, irrevocably appoint each of the Secretary of the SEC, and the Secretary of State or other legally designated officer, of any other state in which you are submitting a notice filing, as your agents to receive service, and agree that such persons may accept service on your behalf, of any notice, subpoena, summons, order instituting proceedings, demand for arbitration, or other process or papers, and you further agree that such service may be made by registered or certified mail, in any federal or state action, administrative proceeding or arbitration brought against you in any place subject to the jurisdiction of the United States, if the action, proceeding, or arbitration (a) arises out of any activity in connection with your investment advisory business that is subject to the jurisdiction of the United States, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these acts, or (ii) the laws of the state in which you maintain your principal office and place of business or of any state in which you are submitting a notice filing.

Signature:

Date: MM/DD/YYYY

Printed Name: HASSANALI ANDREW SHAMS VELLANI

Title: CHIEF COMPLIANCE OFFICER 7 CHIEF LEGAL OFFICER

Adviser CRD Number: 170969

2. Appointment and Consent: Effect on Partnerships

If you are organized as a partnership, this irrevocable power of attorney and consent to service of process will continue in effect if any partner withdraws from or is admitted to the partnership, provided that the admission or withdrawal does not create a new partnership. If the partnership dissolves, this irrevocable power of attorney and consent shall be in effect for any action brought against you or any of your former partners.

3. Non-Resident Investment Adviser Undertaking Regarding Books and Records

By signing this Form ADV, you also agree to provide, at your own expense, to the U.S. Securities and Exchange Commission at its principal office in Washington D.C., at any Regional or District Office of the Commission, or at any one of its offices in the United States, as specified by the Commission, correct, current, and complete copies of any or all records that you are required to maintain under Rule 204-2 under the Investment Advisers Act of 1940. This undertaking shall be binding upon you, your heirs, successors and assigns, and any person subject to your written irrevocable consents or powers of attorney or any of your general partners and managing agents.

Signature:

Date: MM/DD/YYYY

Printed Name: HASSANALI ANDREW SHAMS VELLANI

Title: CHIEF COMPLIANCE OFFICER 7 CHIEF LEGAL OFFICER

Adviser CRD Number: 170969