FINANCIAL DISCLOSURE FORM COVER PAGE

The Financial Disclosure Form ("Form") must be accurately completed and submitted by each Disclosing Entity. The requirement of disclosure of financial interests is a continuing obligation. If circumstances change and the disclosure is no longer accurate, Disclosing Entities must provide an updated form within three (3) business days of the change. The Form must also be updated annually by July 1. Upon review of the Form, CMS and IOC may request additional information to clarify and/or complete the submission.

Separate forms are required for the QP and Sub-Participant; additional disclosures may be required for parent entities, upon request of CMS or IOC.

This disclosure is submitted for (check one):

\boxtimes	Qualified Purchaser	
	Sub Participant	
Quali	fied Purchaser Name:	VAP Funding Master Trust II
Doing	g Business As (DBA):	N/A
Disclo	osing Entity Name:	VAP Funding Master Trust II
forma	and Jurisdiction of business ation or incorporation, if applicable:	12/15/2016 Delaware Trust
nstrun	nent of Ownership or Beneficial Interest	(check one):
	Sole Proprietorship	A Company of the Comp
	Corporate Stock (C-Corporation, S-Corp	poration, Professional Corporation, Service Corporation)
	Limited Liability Company Membersh Partnership)	nip Agreement (Series LLC, Low-Profit Limited Liabilit
	Partnership Agreement (General Partn Limited Liability Limited Partnership)	nership, Limited Partnership, Limited Liability Partnership
\boxtimes	Trust Agreement (Beneficiary)	
	Other	
	If you selected Other, please describe:	

STEP 1 SUPPORTING DOCUMENTATION SUBMITTAL All Disclosing Entities must provide a current organizational chart showing its ownership structure and composition. Disclosing Entities must select one of the options below and select the documentation you are submitting. You must provide the documentation the applicable section requires with this form. Option 1 – Publicly Traded Entities 1.A. Complete Step 2, Option A for each qualifying individual or entity holding any direct or indirect financial interest in the Disclosing Entity. OR 1.B. Provide a copy of the federal 10-K (attached or electronically), and skip to Step 3. Option 2 – Privately Held Entities with more than 200 Shareholders 2.A. Complete Step 2, Tables 1 and 2 for each qualifying individual or entity holding any direct or indirect financial interest in the Disclosing Entity. 2.B. Complete Step 2, Tables 1 and 2 for each qualifying individual or entity holding any direct or indirect financial interest in the Disclosing Entity and attach the information federal 10-K reporting companies are required to report under 17 CFR 229.401. \boxtimes Option 3 - All other Privately Held Entities 3.A. Complete Step 2, Tables 1 and 2 (and Table 3 if a TRUST) for each qualifying individual or entity holding any direct or indirect financial interest in the Disclosing Entity.

STEP 2 DISCLOSURE OF FINANCIAL INTEREST OR BOARD OF DIRECTORS

Complete for all entities. Additional rows may be inserted into the tables or an attachment if needed.

Ownership Share and Distributive Income —Provide the name and address of each person, director, owner, officer, association, financial backer, partnership, other entity, corporation or trust with an indirect or direct financial interest in each qualified purchaser, or entity. If you checked 3.A. and the entity is a TRUST also complete TABLE 3.

Check here if including an attachment with requested information in a format substantially similar to the format below.

Name (first, middle, last, maiden, aliases)	Mailing Address	Percentage of Ownership/Interest	Type of Ownership	Class of Stock	Indirect Earnings
			-		<u> </u>

Distributive Income – If you selected Option 1.A., 2.A, 2.B. or 3.A. in Step 1, provide the name and address of each individual or entity and their percentage of the Disclosing Entity's total distributive income.

Check here if including an attachment with requested information in a format substantially similar to the format below.

TABLE - 2	\$690H		
Name (first, middle, last, maiden, aliases)	Mailing Address	% of Distributive Income	\$ Value of Distributive Income (Direct and Indirect)

Check here if including an attachment with requested information in a format substantially similar to the format below.

TABLE - 3					
Name (first, middle, last, maiden, aliases)	Date of Birth	Mailing Address			
		,			
		-			

VAP Funding Master Trust II
Table 1 and Table 2
Ownership Share and Distributive Income
07/01/18 - 09/30/2018

Amended

TABLE - 1 and 2	1		-				
Name (first, middle, last, maiden, aliases)	Mailing Address	% of Ownership/Inte rest	Type of Ownership	Class of Stock	Earnings (1)	% of Distributive Income	\$ Value of Distributive Income (Direct and Indirect) (2)
Barclays Bank, PLC	745 7th Avenue New York, NY 10019	100%	Loans	N/A	\$ 6,055,933	100%	\$ 3,939,033
Bluestone Capital Markets, LLC	700 W. Morse Blvd, Suite 220, Winter Park FL 32789	100%	Certificate	N/A	\$ 2,085,287	100%	\$ -

- (1) Accrued interest income earned by the noteholder or accrued certificate income for the certificate holder from 7/1/2018 to 9/30/2018.
- (2) Interest income received by the noteholder or certificate income paid to the certificate holder from 7/1/2018 to 9/30/2018.

VAP Funding Master Trust II Table 3 Additional information for Trusts 07/01/18 - 09/30/2018

TABLE - 3		
Name (first, middle, last, malden, aliases) (Certificate Holder)	Closing Date	Mailing Address
Bluestone Capital Markets, LLC	12/15/2016	700 W. Morse Blvd, Suite 220, Winter Park FL 32789