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APPEARS HERE] SAN FRANCISCO WASHINGTON, DC www.ropesgray.com

January 12, 2007

Securities and Exchange Commission
Attn: Filing Desk
450 Fifth Street, N.W.
Washington, D.C. 20549

Re: Kohlberg Capital Corporation

Ladies and Gentlemen:

Enclosed for filing on behalf of Kohlberg Capital Corporation (the "Company") pursuant to Rule 17g-1(g) under the Investment Company Act of 1940 please find a copy of (i) the Company's single insured bond for the period from November 22, 2006 to November 22, 2007, (ii) the resolution of a majority of the board of directors of the Company who are not "interested persons" approving the amount, type, form and coverage of the single insured bond, and (iii) a statement as to the period for which premiums have been paid.

Please call me at (212) 841-0484 if you have any questions.

Sincerely,

/s/ Rebecca C. O'Brien

Rebecca C. O'Brien

Enclosure

KOHLB&CO

ACORD(TM) INSURANCE BINDER

DATE

11/22/06

THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON THE REVERSE SIDE OF THIS FORM.

PRODUCER PHONE
(A/C, No, Ext): 914-769-2220 COMPANY

BINDER #

FAX
(A/C. No); 9147476399 Federal Insurance Co

112206

EFFECTIVE

EXPIRATION

USI Northeast, Inc. - C/L
Suite 301, North
555 Pleasantville Rd.
Briarcliff Manor, NY 10510

DATE	TIME	DATE	TIME
11/22/06	12:01 X AM	11/22/07	X 12:01 AM
	PM		NOON

THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY #:

CODE: SUB CODE:

AGENCY DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (Including Location)
CUSTOMER ID: 962
INSURED Kohlberg Capital LLC
Kohlberg Capital Corporation
295 Madison Avenue
6th Floor
New York, NY 10017

COVERAGES

LIMITS

TYPE OF INSURANCE	COVERAGE/FORMS	DEDUCTIBLE	COINS %	AMOUNT
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PROPERTY CAUSES OF LOSS

[] BASIC [] BROAD [] SPEC
[]
[]

GENERAL LIABILITY EACH OCCURRENCE \$
[] COMMERCIAL GENERAL LIABILITY DAMAGE TO RENTED PREMISES \$
[] [] CLAIMS MADE [] OCCUR MED EXP (Any one person) \$
[] PERSONAL & ADV INJURY \$
[] GENERAL AGGREGATE \$
[] RETRO DATE FOR CLAIMS MADE: PRODUCTS - COMP/OP AGG \$

AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT \$
[] ANY AUTO BODILY INJURY (Per person) \$
[] ALL OWNED AUTOS BODILY INJURY (Per accident) \$
[] SCHEDULED AUTOS PROPERTY DAMAGE \$
[] HIRED AUTOS MEDICAL PAYMENTS \$
[] NON-OWNED AUTOS PERSONAL INJURY PROT \$
[] UNINSURED MOTORIST \$
[] \$

AUTO PHYSICAL DAMAGE DEDUCTIBLE [] ALL VEHICLES [] SCHEDULED VEHICLES [] ACTUAL CASH VALUE
[] COLLISION: [] STATED AMOUNT \$
[] OTHER THAN COL: [] OTHER

GARAGE LIABILITY AUTO ONLY - EA ACCIDENT \$
[] ANY AUTO OTHER THAN AUTO ONLY:
[] EACH ACCIDENT \$
[] AGGREGATE \$

EXCESS LIABILITY EACH OCCURRENCE \$
[] UMBRELLA FORM AGGREGATE \$
[] OTHER THAN UMBRELLA FORM RETRO DATE FOR CLAIMS MADE: SELF-INSURED RETENTION \$

WORKER'S COMPENSATION [] WC STATUTORY LIMITS
AND E.L. EACH ACCIDENT \$
EMPLOYER'S LIABILITY E.L. DISEASE - EA EMPLOYEE \$
E.L. DISEASE -POLICY LIMIT \$

SPECIAL Miscellaneous Coverage - Fidelity FEES \$
CONDITIONS/ Limit \$1,000,000 Ded.: \$50,000 TAXES \$
OTHER ESTIMATED TOTAL PREMIUM \$
COVERAGES

NAME & ADDRESS

[] MORTGAGEE
[] LOSS PAYEE

[] ADDITIONAL INSURED

LOAN#

AUTHORIZED REPRESENTATIVE

/s/ Michael W. Gilligan

ACORD 75 (2001/01)1 of 2 #28403

NOTE: IMPORTANT STATE INFORMATION ON REVERSE SIDE JAP
(C) ACORD CORPORATION 1993

CONDITIONS

This Company binds the kind(s) of insurance stipulated on the reverse side. The Insurance is subject to the terms, conditions and limitations of the policy(ies) in current use by the Company.

This binder may be cancelled by the Insured by surrender of this binder or by written notice to the Company stating when cancellation will be effective. This binder may be cancelled by the Company by notice to the Insured in accordance with the policy conditions. This binder is cancelled when replaced by a policy. If this binder is not replaced by a policy, the Company is entitled to charge a premium for the binder according to the Rules and Rates in use by the Company.

Applicable in California

When this form is used to provide insurance in the amount of one million dollars (\$1,000,000) or more, the title of the form is changed from "Insurance Binder" to "Cover Note".

Applicable in Delaware

The mortgagee or Obligee of any mortgage or other instrument given for the purpose of creating a lien on real property shall accept as evidence of insurance a written binder issued by an authorized insurer or its agent if the binder includes or is accompanied by: the name and address of the borrower; the name and address of the lender as loss payee; a description of the insured real property; a provision that the binder may not be canceled within the term of the binder unless the lender and the insured borrower receive written notice of the cancellation at least ten (10) days prior to the cancellation; except in the case of a renewal of a policy subsequent to the closing of the loan, a paid receipt of the full amount of the applicable premium, and the amount of insurance coverage.

Chapter 21 Title 25 Paragraph 2119

Applicable in Florida

Except for Auto Insurance coverage, no notice of cancellation or nonrenewal of a binder is required unless the duration of the binder exceeds 60 days. For auto insurance, the insurer must give 5 days prior notice, unless the binder is replaced by a policy or another binder in the same company.

Applicable in Nevada

Any person who refuses to accept a binder which provides coverage of less than \$1,000,000.00 when proof is required: (A) Shall be fined not more than \$500.00, and (B) is liable to the party presenting the binder as proof of insurance for actual damages sustained therefrom.

FIDELITY BOND

- RESOLVED: That, after considering all relevant factors, the action of the Authorized Officers of the Company in obtaining a bond issued by Federal Insurance Company, covering larceny and embezzlement and certain other acts, with a limit of liability of \$1,000,000, for an aggregate one-year premium of \$6,000, be, and it hereby is, authorized and approved.
- RESOLVED: That pursuant to Rule 17g-1 under the 1940 Act, as amended, Dayl W. Pearson, President and Chief Executive Officer, and Michael I. Wirth, Chief Financial Officer, Chief Compliance Officer and Secretary, are each hereby designated as an agent for the Company to make the filings and give the notices required by subparagraph (g) of said Rule.
- RESOLVED: That the form and amount of the bond issued by Federal Insurance Company, after consideration of all relevant factors including the Company's aggregate assets to which persons covered by the bond have access, the type and terms of arrangements made for custody and safekeeping of assets, and the nature of the securities held, be and they hereby are authorized and approved.

KOHLBERG CAPITAL CORPORATION (the "Company")
STATEMENT REGARDING PREMIUMS PAID

The Company has paid premiums under its single insured bond for the period from November 22, 2006 through November 22, 2007.

Kohlberg Capital Corporation

By: /s/ Michael I. Wirth

Dated: December 13, 2006

Michael I. Wirth
Chief Financial Officer