

Form N-PX

N-PX: Filer Information

Filer CIK	0002085091
Filer CCC	*****
Date of Report	06/30/2026
Are you a Registered Management Investment Company or an Institutional Manager?	Registered Management Investment Company
Filer Investment Company Type	Form N-2 Filer (Closed-End Investment Company)
Is this a LIVE or TEST Filing?	☒ LIVE ☐ TEST
Is this an electronic copy of an official filing submitted in paper format?	☐

Submission Contact Information

Name	
Phone Number	
E-mail Address	

Notification Information

Notify via Filing Website only?	☐
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N-PX: Cover Page

Name and address of reporting person:

Name of reporting person (For registered management investment companies, provide exact name of registrant as specified in charter)	Robinhood Ventures Fund I
Street 1	85 Willow Road
Street 2	
City	Menlo Park
State/Country	CALIFORNIA
Zip code and zip code extension or foreign postal code	94025
Telephone number of reporting person, including area code:	650-761-7789

Name and address of agent for service:

Name of agent for service	John Markle
Street 1	85 Willow Road
Street 2	
City	Menlo Park

State/Country	CALIFORNIA
Zip code and zip code extension or foreign postal code	94025
Reporting Period:	Report for the year ended June 30, 2026
SEC Investment Company Act or Form 13F File Number:	811-24119
CRD Number (if any):	
Other SEC File Number (if any):	
Legal Entity Identifier (if any):	

Report Type (check only one):

Registered Management Investment Company.

- ☐ Fund Voting Report (Check here if the registered management investment company held one or more securities it was entitled to vote.)
☒ Fund Notice Report (Check here if the registered management investment company did not hold any securities it was entitled to vote.)

Institutional Manager.

- ☐ Institutional Manager Voting Report (Check here if all proxy votes of this reporting manager are reported in this report.)
☐ Institutional Manager Notice Report (Check here if no proxy votes are reported in this report and complete the notice report filing explanation section below)
☐ Institutional Manager Combination Report (Check here if a portion of the proxy votes for this reporting manager are reported in this report and a portion are reported by other reporting person(s).)

Do you wish to provide explanatory information pursuant to Special Instruction B.4?:

☐ Yes
 ☒ No

Additional information:

N-PX: Summary - Included Series

Number of Series:

Information about the Series: NONE

N-PX: Signature Block

Reporting Person:

By (Signature):

By (Printed Signature):

By (Title):

Date: