	OOA T	Exe	empt Organization					x Returr	1 - ,	OMB No 1545 0687	
F	orm 990-T		(and proxy ta					ì	2	2018	
			r 2018 or other tax year beginning						'	20,10	
Depa	rtment of the Treasury nal Revenue Service		o to www.irs.gov/Form990						ı	Open to Public Inspection	í fór,
	Check box if	- Do not o	enter SSN numbers on this form			changed and see in		:	D F	(501(c)(3) Organizations O mployer identification num	
A	→ address changed				-	•	•	,	: : - (6	Employees' trust, see nstructions)	
	Exempt under section $501(c) 03$	n Print or	1330 Sunday Driv	e #	105	arwar rou	naaci	J11 =	37. 2	42-1747195	
ř	408(e) 220(_	Raleigh, NC 2760					1	F	Inrelated business activity See instructions)	code
[408A530('	See manachons /	
	529(a)					- 				523000	
C B	ook value of all assets t end of year	<u> </u>	exemption number (See ins								
	19,887,972	G Check	corganization type	X	501(0	c) corporation	501	(c) trust	401(a)	trust Other tri	ust
			's unrelated trades or busines			<u>1</u>	D	escribe the on			
1	trade or business he If more than one, de	ere ► <u>Invest</u>	ment in partnersh t in the blank space at the	11p:	of the	nrevious sent	ence co	molete Parts		ne, complete Parts I- complete a Schedule	
			ss, then complete Parts III		OI tile	, previous sem	erice, co	implete i arts	i i ana n,	complete a concadio	
1 1	During the tax year,	was the corpo	ration a subsidiary in an at	ffiliat	ted gr	oup or a parer	it-subsid	ary controlle	d group?	► Yes X No	5
			fying number of the parent	corp	orati	on 🟲					
			ood A. Jackson				-			19-861-2919	
** / *			usiness Income	_		(A) Inco	me	(B) Exp		(C) Net	e0 3 1
	a Gross receipts or s		- Dalana		1.					Branch Control	
2	b Less returns and allowated Cost of goods sold		line 7)	e -	1 c			1 5 Marie 10 1		12 (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	***
3	Gross profit Subtr	•			3			DISABLE NO	<u> </u>	u Manari anes, Miroz, s. Elekti S	\$ 91
	a Capital gain net in				4a	47	7,301.	F-70-744-4-70-10-10-10-10-10-10-10-10-10-10-10-10-10		47,30	
	b Net gain (loss) (Form 4	,	<u>-</u>		4b		, 301.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		47,30	<u>+ · · </u>
	c Capital loss deduc		, (4c				430		
5	Income (loss) from	a partnership or	an S corporation	1							_
_	(attach statement)		30		5	-19	,202.	A Proof PROPERTY COLUMN	1、1000万、将	-19,20	<u>2.</u>
6	Rent income (School	•	(Sahadula E)		7						
7 8	Unrelated debt-fina		m a controlled organization (Schedu	E\							
9		•	(9), or (17) organization (Schedule G	}	9		•			,	
10	Exploited exempt		· · · · · •	"	10						
11	Advertising income	=	(Concado I)	ł	11						
12	Other income (See		attach schedule)	Ì				P	775		
					12						
	Total. Combine line				13		,099.		0.	28,09	<u>9.</u>
Pai	till Deduction	ns Not Take	n Elsewhere (See ins	struc	ction	s for limitati	ons on	deductions	s.) (Exc	ept for	
			ons must be directly of					ed busines		e.)	
	•		ors, and trustees (Schedule	: KII		RECEIV	ED	7	14		
15 16	Salaries and wage Repairs and maint			1	-			ပ္က	16		—
17	Bad debts	criance		B047	$\mathbf{S} = \mathbf{S}$	OCT 28 20	10	2	17		—
18	Interest (attach sci	hedule) (see in	istructions)	14	<u>'L</u>		13	إذ	18		—
19	Taxes and licenses		511 451151			CDEN		<u> </u>	19	-	
20			tructions for limitation rules	s)		GDEN, I	<u> </u>		20		_
21	Depreciation (attac	,		•		2	1	_			
22	Less depreciation	claimed on Scl	hedule A and elsewhere or	n retu	urn	2	2a		22b	7	
23	Depletion								23		_
24	Contributions to de	eferred comper	sation plans						24		_
25	Employee benefit j	programs							25		_
26	Excess exempt exp	penses (Sched	ule I)						26		
27	Excess readership	•	•						27		
28	Other deductions (•						28		
29	Total deductions.		_	- مام	duction	n Subtract In	o 20 fro	m line 12	29 30	20.00	_
30 31			ne before net operating los tax years beginning on or after Ja					11 IIIIC 13	31	28,09	<u>フ・</u>
32			ne Subtract line 31 from lii			o (see manachens	,		32	28,099	
			otice, see instructions.			TEEA	0201L 1/31.	/19		Form 990-T (2018	

			an Agarwal Foundation	<u> </u>	42-	-1747195	Page 2		
		elated Business Tax	· · · · · · · · · · · · · · · · · · ·						
33	Total of unrelated instructions)	business taxable income	computed from all unrelated trad	es or businesses (se	ee	33	28,099.		
34	Amounts paid for	disallowed fringes			Γ	34			
35		operating loss arising in t	ax years beginning before Januar			25			
20	instructions)	1		See Statement		35	28,099.		
36		al of unrelated business taxable income before specific deduction. Subtract line 35 from the sum nes 33 and 34.							
27			ee line 37 instructions for excepti	one)	ŀ	36	0.		
			act line 37 from line 36. If line 37		36	3/			
30	enter the smaller		act line 37 from line 30 in line 37	is greater than line t	,	38	0.		
Par	tilV Tax Com	putation							
39			ultiply line 38 by 21% (0 21)		>	39	0.		
			ions for tax computation Income	tax on the amount					
	on line 38 from	Tax rate schedule o			▶	40			
41	Proxy tax. See in	—		,	▶ }	41			
	•	um tax (trusts only)			<u> </u>	42			
		ant Facility Income. See	instructions			43			
44	•	1, 42, and 43 to line 39 o			F	44	0.		
					J.	 -			
	t V Tax and F		a 1110 trusta attach Form 1116)	45 -	· 1	otomia i			
			n 1118, trusts attach Form 1116)	45a					
	Other credits (see	,	(coo instructions)	45 b					
		credit Attach Form 3800 ar minimum tax (attach F		45 c 45 d					
		d lines 45a through 45d	Jill 8801 01 8827).	450		45 e	0		
	Subtract line 45e f				-	46	<u>0.</u> 0.		
			Form 8611	orm 8866	}	40	0.		
7/	Other (attach			51111 6666		47			
48		es 46 and 47 (see instruc	tions)		-	48	0.		
49		•	55-A or Form 965-B, Part II, colum	nn (k) line 2	-	49			
					إ				
	•	overpayment credited to	2018	50 a	15 000				
	2018 estimated tax			50 b	15,000.	:. I			
	Tax deposited with		at acurae (ace instructions)	50 c					
		ons Tax paid of Withheld g (see instructions)	at source (see instructions)	50 d 50 e		345 ³⁴			
	•	• •	premiums (attach Form 8941)	50 f					
		stments, and payments	Form 2439	301		*# A			
9	Form 4136	oth		_ _{E0.0}					
			Total	► 50 g	[J	51	15 000		
		dd lines 50a through 50g	and it Farm 2220 is attached		⊢	52	15,000.		
	•	• •	neck if Form 2220 is attached						
			nes 48, 49, and 52, enter amount		⊢	53			
		•	otal of lines 48, 49, and 52, enter	· · · · · · · · · · · · · · · · · · ·		54	15,000.		
			ited to 2019 estimated tax ►	15,000.		55	<u>0.</u>		
Par	E		n Activities and Other Info	<u> </u>			·		
56			the organization have an interest in				Yes No		
	financial account (bank, securities, or other) in a	foreign country? If 'Yes,' the orga	inization may have t	o file FinCEN	Form 114,			
	Report of Foreign Ba	ank and Financial Accounts	If 'Yes,' enter the name of the fore	ign country here			_ <u>X</u>		
57	During the tax yea	r, did the organization red	ceive a distribution from, or was if	t the grantor of, or tr	ansferor to, a	foreign trust?	X		
	If 'Yes,' see instruct	ions for other forms the org	anization may have to file						
58	Enter the amount of	tax-exempt interest receive	ed or accrued during the tax year	\$	0.				
	Under penalties	of perjury, I declare that I have ex	amined this return, including accompanying on of preparer (other than taxpayer) is based of	schedules and statements,	and to the best of	my knowledge and			
Sign		- A CONTRACT DECIDIATION	10/22/19 b	Sec/Tr/Dir	TK.	May the IRS discuss	this return with		
Here	Signature of	Officer	Date	Title	ti	he preparer shown to	below (see		
		<u> </u>				X	Yes No		
Paid	Print/Type prepa	irer's name	Preparer's signature	Date	Check If	PTIN			
Pre-		ourn	futton	10/14/19	self employed	P016382	85		
pare	l = .	▶ Blazek & Vette	rling		Firm's EIN	76-0269860)		
Üse	Firm's address	► 2900 Weslayan,							
Only	/		027-5132		Phone no	(713) 439	9-5739		
BAA		,	TEEA0202L 01/24/19		·		990-T (2018)		

Page 2

42-1747195 Page 3

Schedule A — Cost of Goo	ds Sold. Ente	r method of inv	entory valuati	ion ►					_		
1 Inventory at beginning of ye	ear	1		6 lr	vento	ry at	end of year	6			
2 Purchases	Ī	2		7 C	ost o	f good	is sold. Subtract				
3 Cost of labor	Ī	3					ne 5 Enter here	 -			
4 a Additional section 263A costs (attac	ch schedule)			aı	na in	Part I	, line 2	7	<u></u>	Yes	No
		4 a		8 D	a the	rulas	of section 263A (with	h rosi	nect to	163	1
b Other costs (attach sch)		4 b					duced or acquired fo				
5 Total. Add lines 1 through 4	-b	5					zation?				X
Schedule C - Rent Income	e (From Real	Property and	d Personal	Prop	erty	Leas	sed With Real P	rope	rty) (see ıı	nstruct	ions)
1 Description of property											
(1)											
(2)											
(3)			. <u></u>								
(4)											
	2 Rent receive						3(a) Deduction	s dire	ctiv connec	ted wit	:h
(a) From personal prop (if the percentage of rent for property is more than 10% more than 50%)	eal and perso entage of ren ceeds 50% oi I on profit or i	it for pe r if the	ersona rent	al	the income in	n colui					
(1)											
(2)											
(3)											
(4)											
Total		Total					(h) Takal daduahana	T-14			
(c) Total income. Add totals of cohere and on page 1, Part I, line 6		2(b) Enter					(b) Total deductions I here and on page 1, Par I, line 6, column (B)				
Schedule E - Unrelated De	ebt-Financec	Income (see	instructions)								
1 Description of debt	t-financed prope	ertv	2 Gross income from or allocable to debt-			3 D∈	Deductions directly connected with or allocable to debt-financed property				le to
T Description of desc	mianoda prope		financed p			depr	(a) Straight line epreciation (attach sch)		(b) Other deductions (attach schedule)		
(1)											
(2)											
(3)											
(4)									···		
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	or allocable to	justed basis of debt-financed ach schedule)	6 Colui divide colum	d by		7 Gross income reportable (column 2 x column 6)			Allocable of (column 6 : olumns 3(a)	c total	of
(1)					%						
(2)					%						
(3)					8						
(4)					%						
						Enter Part	here and on page I, line 7, column (A)	1, Ent Pai	er here and t I, line 7,	i on pa columr	ige 1, i (B)
Totals					>			1			
Total dividends-received deduction	ons included in	column 8					·	-			
BAA		TE	EA0203L 01/30/	19					Form !	990-T (2018)

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions) **Exempt Controlled Organizations** 5 Part of column 4 6 Deductions directly 4 Total of specified 1 Name of controlled 2 Employer 3 Net unrelated that is included in identification payments made connected with organization income (loss) the controlling income in column 5 number (see instructions) organization'š gross income (1) (2)(3) (4)Nonexempt Controlled Organizations 10 Part of column 9 that is 11 Deductions directly 8 Net unrelated 9 Total of specified 7 Taxable Income included in the controlling connected with income payments made income (loss) (see instructions) organization's gross income ın column 10 (1) (2)(3) (4) Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B) Add columns 5 and 10 Enter here and on page 1, Part I, line 8. column (A) **Totals** Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) 3 Deductions 4 Set-asides 5-Total deductions and directly connected (attach schedule) 1 Description of income 2 Amount of income (attach schedule) set-asides (column 3 plus column 4) (1) (2) (3) (4) Enter here and on page 1, Enter here and on page 1, Part I, line 9, column (A) Part I, line 9, column (B). Totals Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 2 Gross 6 Expenses attributable to 7 Excess exempt 3 Expenses directly 4 Net income (loss) 5 Gross income from unrelated activity that is not unrelated business expenses (column 6 connected with from unrelated trade column 5 1 Description of exploited activity business minus column 5. but production or business (column income from Income not more than of unrelated 2 minus column 3) column 4) trade or If a gain, compute columns 5 through 7 business income business (1) (2)(3) (4) Enter here and Enter here and Enter here and on page 1, Part II, line 26 on page 1, Part I, line 10, on page 1, Part I, line 10, column (A) column (B) **Totals** Schedule J - Advertising Income (see instructions) Income From Periodicals Reported on a Consolidated Basis 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 2 Gross 3 Direct 5 Circulation 6 Readership 7 Excess readership costs (col 6 minus col 5, but not more than col 4) advertising advertising ıncome costs 1 Name of periodical income costs (1) (2) (3) (4) Totals (carry to Part II, line (5))

Page 5

Part II Income From Periodical	s Reported or	n a Separate B	Basis (For each p	eriodical listed in	Part II, fill in col	umns 2 through
7 on a line-by-line basis)	-					
	2 0	2 Dyract	4 Advartising gain or	E 0	C Dandarahia	7 Fuence readership

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (col 6 minus col 5, but not more than col 4)
(1)					<u> </u>	·
(2)	-					
(4)			CHE PERSONAL PROBLEM AND AND ADDRESS. W.			,
Totals from Part I						
	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)	Thinking temperature of a community	The state of the s	Paris	Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1− 5)			The state of the s	<u>inta wa dini</u>		

Schedule K — Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	
Total. Enter here and on page 1, Part II, line 14		-	

TEEA0204 L 12/31/18

Form 990-T (2018)

2018

Federal Statements

Page 1

The Asha and Sajjan Agarwal Foundation

42-1747195

Statement 1 Form 990-T, Part I, Line 5 Income (Loss) from Partnerships and S Corporations

Name	 Gross Income	Deductions	Income (Loss)
AREP III Kapiolani Co Investor LP Argosy Credit Partners LP HarbourVest Ptrs Co-Inv Fund IV AIV HarbourVest Ptrs Co-Inv Fund IV	\$ -18,222. 7,769. -9. 2,757.	\$ 0. 5,029. 345. 6,123. Total	\$ -18,222. 2,740. -354. -3,366. -19,202.

Statement 2 Form 990-T, Part III, Line 35 Net Operating Loss Deduction

Loss Year Ending	0	riginal Loss	P	Loss reviously Used	1	Loss Availab	le
12/31/16 Net Operating Loss Taxable Income		46,925.	•	10,996.	\$	\$	35,929. 35,929. 28,099.
Net Operating Loss	Deduction	(Limited to Ta	axable	Income)		\$	28,099.

SCHEDULE D

· (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

► Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No 1545 0123

Name	The Asha and Sajjan Agarwal	Foundation		Employer	Employer identification number			
				42-17	4719	5		
Pai	til Short-Term Capital Gains and	Losses (See instru	ctions)		_	·		
ente	instructions for how to figure the amounts to r on the lines below. form may be easier to complete if you round	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustme to gain or loss Form(s) 8949, I	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the		
	ents to whole dollars	(sales price)	(or other basis)	line 2, column	ı (g)	result with column (g)		
	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b							
	Totals for all transactions reported on Form(s) 8949 with Box A checked							
	Totals for all transactions reported on Form(s) 8949 with Box B checked							
	Totals for all transactions reported on Form(s) 8949 with Box C checked	17,391.	<u> </u>		1	17,391.		
4	Short-term capital gain from installment sales	from Form 6252, line 2	26 or 37		4			
5	Short-term capital gain or (loss) from like-kind	d exchanges from Form	8824		5			
6	Unused capital loss carryover (attach compute	ation).			6			
	Net short-term capital gain or (loss) Combine				7	17,391.		
	till Long-Term Capital Gains and L	.osses (See instruc	ctions)	1		42.01.4		
ente This	instructions for how to figure the amounts to r on the lines below. form may be easier to complete if you round ents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustme to gain or loss Form(s) 8949, F line 2, column	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (q)		
	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.							
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	-	-	387700436.88877.49783.447.447.7				
9	Totals for all transactions reported on Form(s) 8949 with Box E checked							
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	29,910.			1	29,910.		
11	Enter gain from Form 4797, line 7 or 9				11			
12	Long-term capital gain from installment sales	from Form 6252, line 2	6 or 37		12			
13	Long-term capital gain or (loss) from like-kind	exchanges from Form	8824		13			
14	Capital gain distributions (see instructions)		14					
15	Net long-term capital gain or (loss) Combine		15	29,910.				
	t III Summary of Parts I and II							
16	Enter excess of net short-term capital gain (lii		16	17,391.				
17	Net capital gain Enter excess of net long-term	n capital gain (line 15)	over net short-term ca	ipital loss (line 7)	17	29,910.		
18	Add lines 16 and 17 Enter here and on Form Note: If losses exceed gains, see Capital loss		the proper line on ot	her returns	18	47,301.		

Form **8949**

Sales and Other Dispositions of Capital Assets

► Go to www irs.gov/Form8949 for instructions and the latest information.

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2018

Attachment Sequence No 12A

Department of the Treasury Internal Revenue Service Name(s) shown on return

SSN or taxpayer identification number

42-1747195

The Asha and Sajjan Agarwal Foundation

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS X (C) Short-term transactions not reported to you on Form 1099-B	[(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
X (C) Short-term transactions not reported to you on Form 1099-B	Ì		(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
		X	(C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property (Example 100 shares XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed of	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f) See the separate instructions		Gain or (loss) Subtract column (e)	
		(Moʻ, day, yr)	(see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
From Sch K-1 Argos	y Credit Pa	rtners LP	16,014.	_ 0.			16,014.	
From Sch K-1 Harbo	urvest Ptrs	Co-Invest	1,377.	0.			1,377.	
					·	-		
	-							
		-		 -				
		<u> </u>						
			-					
							<u>. </u>	
2 Totals. Add the amoun (subtract negative amo include on your Schedu checked), line 2 (if Bos Box C above is checke	ounts) Enter each ule D, line 1b (if B k B above is check	(e), (g), and (h) total here and ox A above is ted), or line 3 (if	17,391.	0.		0.	17,391.	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2018)

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side

The Asha and Sajjan Agarwal Foundation

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement (s) from your broker A substitute statement will have the same information as Form 1099-B Either will show whether your basis (usually your cost) was reported to the IRS by your

broker and may even tell you which box to check

[Partill Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F Form 8949, page 2, for each complete as many forms will	applicable box 1	f you have more le	ong-term transact	your long-term tran ions than will fit o	nsactions, coi on this page	mplete a separate e for one or more	of the boxes,
(D) Long-term transact		-		ed to the IRS (see N	lote above)		
(E) Long-term transa	ictions reported or	n Form(s) 1099-B	showing basis wa	sn't reported to t	he IRS		
X (F) Long-term transa	*		=				
1 (a) (b) (c) Description of property Date acquired Date sold or			(d) Proceeds (sales price)	(e) Cost or other basis See the Note below	Adjustment, If you enter ar enter a c See the se	(h) Gain or (loss) Subtract column (e)	
((Mo , day, yr)	(Mo , day, yr)	(see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
From Sch K-1 Argos	y Credit Pa	rtners LP	20,954.	0.			20,954.
From Sch K-1 Harbo	urvest Ptrs	Co-Invest	8,956.	0.			8,956.
	·						<u>.</u>
							<u>_</u>
,							
							<u> </u>
							
			-				
2 Tatala Add the accounts	un nolumne (d) (e) (a) and (b)					
2 Totals. Add the amounts (subtract negative amour include on your Schedule checked), line 9 (if Box E Box F above is checked)	nts) Enter each to D, line 8b (if Bo x above is checked	tal here and c D above is	29.910.	0.		0.1	29.910.