Form 990-T	l F	Exempt Organization Bus	sine	ss Income T	ax Return		OMB No 1545-0687
Fam 330-1		(and proxy tax und	er se	ction 6033(e))			0040
•	For ca	lendar year 2018 or other tax year beginning		, and ending		_	2018
Department of the Treasury Internal Revenue Service	•	► Go to www.irs.gov/Form990T for in - Do not enter SSN numbers on this form as it may			tion is a 501(c)(<u>3</u>).		Open to Public Inspection for 01(c)(3) Organizations Only
A Check box if address changed		Name of organization (Check box if name c	hanged	and see instructions.)		Emple	yer identification number byees' trust, see ctions)
B Exempt under section	Print	DENNIS & PHYLLIS WASHINGTON FOUND	OITA	1		36	-3606913
x 501(c)(3U)	or	Number, street, and room or suite no. If a P.O. box	x, see ir	structions.			ted business activity code istructions)
408(e)220(e)	Туре	P.O. BOX 16630		·		•	•
408A530(a)		City or town, state or province, country, and ZIP o	r foreig	n postal code			_
529(a)		MISSOULA, MT 59808-6630				52599	0 +
C Book value of all assets at end of year		F Group exemption number (See instructions.)		504/5) 4	401(0)	at	Other trust
		G Check organization type x 501(c) corp	poration 1		401(a)	-	Other trust
trade or business here	-	ation's unrelated trades or businesses.			he only (or first) unr complete Parts I-V. I		than one
		ace at the end of the previous sentence, complete Pa	arte I an				
business, then complete			ai to i ai	u II, complete a ochequie	W TO CACH AGGINGIN	ai ti auc	OI .
		poration a subsidiary in an affiliated group or a parei	nt-subs	idiary controlled group?		Ye	s X No
• •	•	tifying number of the parent corporation.	0020	iaiai, comi ance group	, _		
J The books are in care of				Telepho	ne number 🕨 (4	06)5	23-1300
Part I Unrelate	d Tra	de or Business Income		(A) Income	(B) Expenses		(C) Net
1a Gross receipts or sale	es						
b Less returns and allow	wances	c Balance	1c				
2 Cost of goods sold (S	Schedule	e A, line 7)	2				
3 Gross profit. Subtract		* *	3				45.860
4a Capital gain net incon		· · · · · · · · · · · · · · · · · · ·	4a	15,769.			15,769.
		Part II, line 17) (attach Form 4797)	4b	2,118,358.			2,118,358.
c Capital loss deduction			4c 5	-3,590,705.	STMT 19		-3,590,705.
5 Income (loss) from a6 Rent income (Schedu		ship or an S corporation (attach statement)	6	-3,390,703.			3,550,703.
7 Unrelated debt-finance		me (Schedule F)	7		.		
_		and rents from a controlled organization (Schedule F)	8				
	-	on 501(c)(7), (9), or (17) organization (Schedule G)	9				
10 Exploited exempt acti			10				
11 Advertising income (S	Scheduk	e J)	11				
12 Other income (See in	struction	ns; attach schedule)	12				
13 Total. Combine lines			13	-1,456,578.			-1,456,578.
Part II Deduction (Except for	ons No contrib	ot Taken Elsewhere (See instructions foutions, deductions must be directly connecte	or limita d with	ations on deductions) the unrelated business	ıncome)		
	ficers, di	rectors, and trustees (Schedule K)			:	14	
15 Salaries and wages		RE	CE	IVED		15	
16 Repairs and mainter	nance		***************************************	08		16 17	
17 Bad debts 18 Interest (attach sche	dula) (e	an instructions)	0 0	2 2019 OSO-SW		18	··
19 Taxes and licenses	oute) (s	ee instructions) DE				19	
	ons (Se	e instructions for limitation rules)		N, UT		20	0.
21 Depreciation (attach	•	562)	تالاز	111, 01			
		n Schedule A and elsewhere on return		22a		22b	
23 Depletion						23	
24 Contributions to def		empensation plans				24	
25 Employee benefit pr						25	
26 Excess exempt expe	-	•			-	26	. .
27 Excess readership c	osts (So	chedule J)				27	
28 Other deductions (a						28	^
29 Total deductions. A			a 4 1 - a ^	O from line 10		29	-1 456 578
		ncome before net operating loss deduction. Subtractions arranged to tax years beginning on or after language.				30 31	-1,456,578.
		loss arising in tax years beginning on or after Janua ncome. Subtract line 31 from line 30	ay I, ZI	אוס (אבה ווואיותרוותווא)		32	-1,456,578.
		rwork Reduction Act Notice, see instructions				J2	Form 990-Ti /2018)

Part I	II Total Unrelated Business Taxa	ble Income									
33	Total of unrelated business taxable income compu	ted from all unrelated trades or businesses	(see ınstru	ctions)	33	-:	1,456	,578.			
34	Amounts paid for disallowed fringes	ounts paid for disallowed fringes 34									
35	Deduction for net operating loss arising in tax years	35			0.						
36	Total of unrelated business taxable income before										
	lines 33 and 34				36	. -1	1,456,	,578.			
37	Specific deduction (Generally \$1,000, but see line 3	37 instructions for exceptions)			37		1	,000.			
	Unrelated business taxable income. Subtract line		ne 36,								
	enter the smaller of zero or line 36	· ·			38	:	1,456,	,578.			
Part I	V Tax Computation		•								
39	Organizations Taxable as Corporations. Multiply	line 38 by 21% (0.21)			▶ 39			0.			
40	Trusts Taxable at Trust Rates. See instructions fo		nt on line 3	38 from:							
	Tax rate schedule or Schedule D (Fo				▶ 40						
41	Proxy tax. See instructions	,			▶ 41						
	Alternative minimum tax (trusts only)				42						
43	Tax on Noncompliant Facility Income. See instruc	ctions			43						
	Total. Add lines 41, 42, and 43 to line 39 or 40, wh				44			0.			
	Tax and Payments										
	Foreign tax credit (corporations attach Form 1118;	trusts attach Form 1116)	45a			<u> </u>					
	Other credits (see instructions)	,	45b								
	General business credit. Attach Form 3800		45c								
d	Credit for prior year minimum tax (attach Form 880	01 or 8827)	45d		\neg						
	Total credits. Add lines 45a through 45d	,			456	e					
46	Subtract line 45e from line 44				46			0.			
47	Other taxes. Check if from: Form 4255	Form 8611 Form 8697 Form	8866	Other (attach sched)	ule) 47	1					
	Total tax. Add lines 46 and 47 (see instructions)				48			0.			
	2018 net 965 tax liability paid from Form 965-A or	Form 965-B, Part II, column (k), line 2			49			0.			
	Payments: A 2017 overpayment credited to 2018	, , , , , , , , , , , , , , , , , , ,	50a								
	2018 estimated tax payments		50b		\neg						
	Tax deposited with Form 8868		50c	·	\neg						
	Foreign organizations: Tax paid or withheld at sour	ce (see instructions)	50d		\neg						
	Backup withholding (see instructions)	(50e		\neg						
	Credit for small employer health insurance premiur	ms (attach Form 8941)	50f		\neg						
	; · · · · · · · · · · · · · · · · · · ·	orm 2439			\dashv						
•		ther Total	► 50g								
51	Total payments. Add lines 50a through 50g		0		— 51						
	Estimated tax penalty (see instructions). Check if Fi	orm 2220 is attached 🕨 🗍			52						
	Tax due. If line 51 is less than the total of lines 48,				▶ 53						
	Overpayment. If line 51 is larger than the total of li				54						
55	Enter the amount of line 54 you want: Credited to			Refunded	55						
Part V	I Statements Regarding Certain	Activities and Other Informa	tion (see	e instructions)		-					
56	At any time during the 2018 calendar year, did the	organization have an interest in or a signati	ire or other	authority			Yes	No			
	over a financial account (bank, securities, or other)	in a foreign country? If "Yes," the organizat	tion may ha	ave to file							
	FinCEN Form 114, Report of Foreign Bank and Fina	incial Accounts. If "Yes," enter the name of t	the foreign	country							
	here							х			
57	During the tax year, did the organization receive a	distribution from, or was it the grantor of, or	r transferor	to, a foreign trust?				х			
	If "Yes," see instructions for other forms the organi	zation may have to file.									
58	Enter the amount of tax-exempt interest received o	r accrued during the tax year > \$		77.				ļ			
	Under penalties of perury, I declar, that I have examine correct, and complete Declaration of pregare tother that	d this return, including accompanying schedules at	nd statement	s, and to the best of my	/ knowledge	and belief, it i	s true,				
Sign	correct, and complete Declaration of preparate/(other tha	in taxpayer) is based on all information of which pre	sparer nas an	y knowleage	Mounths	IRS discuss th					
Here	11/ Ked Stiller	1//+/5·/9 ► EXECUTIVE	E DIRECT	ror		arer shown bel		with			
	Signature of officer	Date			instruction	ons)? X Y	es	No			
-	Print/Type preparer's name	Preparer's signature	Date	Check	ıf P	TIN					
Paid		1		self- emplo	yed						
Prepa	KATHRYN J. OKIMOTO	KATHRYN J. OKIMOTO	11/15/1		* I	P00746598	3				
Use O	15 1 6 4 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			Firm's EIN		91-119401	16				
USE U	1117	TREET, SUITE 1400			,						
	Firm's address ▶ BELLEVUE, WA 98	3004		Phone no.	. (425)	454-4919					

Page 3

Schedule A - Cost of Goods	s Sold. Enter	method of inven	tory valuation N/A			
1 Inventory at beginning of year	1		6 Inventory at end of year		6	
2 Purchases	2	· -	7 Cost of goods sold. S	ubtract l	ine 6	
3 Cost of labor	3		from line 5. Enter here	and in F	Part I,	
4 a Additional section 263A costs			line 2			7
(attach schedule)	4a		8 Do the rules of section	1 263A (\	with respect to	Yes No
b Other costs (attach schedule)	4b	<u> </u>	property produced or	•	<u>=</u> '	
5 Total. Add lines 1 through 4b	5		the organization?	•	,,	
Schedule C - Rent Income (see instructions)	(From Real	Property and	Personal Property	Leas	ed With Real Pro	perty)
Description of property						
(1)						
(2)						
(3)						
(4)						
	2. Rent receiv	ed or accrued			2/2\Dadustions directly	connected with the income in
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	than	of rent for p	nd personal property (if the percent ersonal property exceeds 50% or it t is based on profit or income)	tage f	columns 2(a) ar	nd 2(b) (attach schedule)
(1)						
(2)				·		
(3)						
(4)						
Total	0.	Total		0.		
(c) Total income. Add totals of columns there and on page 1, Part I, line 6, column		ter		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	> 0.
Schedule E - Unrelated Deb	t-Financed	Income (see	nstructions)			
			2. Gross income from		3. Deductions directly con to debt-finance	ced property
1. Description of debt-fir	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(D) Other deductions (attach schedule)
(1)				1		
(2)				1		
(3)						
(4)				1 -		1
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to inced property h schedule)	6. Calumn 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		-	%	1		
(2)			%	1		
(3)			%	1		
(4)			%			
					nter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (8)
Totals			•		O	0.
Total dividends-received deductions in	cluded in columi	n 8			•	0.

823731 01-09-19

Schedule F - Interest, /				ontrolled O						
Name of controlled organizat	controlled organization 2 Employer identification number			elated income instructions)		al of specified ments made 5. Part of column 4 included in the cont organization's gross		ed in the contr	olling	6. Deductions directly connected with income in column 5
1)							İ			
2)										
3)							Ì			
4)										
onexempt Controlled Organi	zations									
7. Taxable Income	8. Net unrelated inco		9. Total o	of specified payr	nents	10. Part of colu	mn 9 that	t is included		ductions directly connected income in column 10
	(see instruction	ns)		made			s income		with	income in column to
1)										
2)										
(3)					1					
(4)										
						Add colum Enter here and line 8, 6		1, Part I,	Enter h	d columns 6 and 11 ere and on page 1, Part I, tine 8, column (B)
otals		-		-1 (4)	<u>▶</u>			0.		
Schedule G - Investme (see insti		Section	501(c)(7	7), (9), or	(17) Or	ganizatior	1			
1. Desc	ription of income			2. Amount of	income	 Deduction directly connected (attach schedule) 	ected	4. Set-a		5. Total deductions and set-asides (col 3 plus col 4)
1)										
(2)										
(3)						-				
(4)									-	1
	***			Enter here and Part I, line 9, co				_		Enter here and on page Part I, line 9, column (B
· otals				Tarri, inte o, co	0.					(3
Schedule I - Exploited	-	y Incom	e, Other	Than Ac		ng Income	9		•	
(see instru	2. Gross unrelated business income from trade or business	directly o with pro of unr	penses connected oduction elated s income	4. Net incomfrom unrelated business (cominus colum gain, computitional)	I trade or dumn 2 n 3) If a e cols 5	5. Gross inco from activity is not unrela business inco	that ted	6. Exp attributa colum	ble to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)		1								
(2)		 								
(3)					+					
		 								
(4)	Enter here and on page 1, Part I, line 10, col (A)		re and on , Part I, col (B)		1					Enter here and on page 1, Part II, line 26
otals >	0	1	0.							<u> </u>
Schedule J - Advertisi					_					
Part I Income From	Periodicals Re _l	oorted o	n a Con	solidated	Basis					
1. Name of periodical	2. Gross advertising income		3. Direct ertising costs			5. Circula e income		6. Reade costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)										
(2)				_		ļ				
(3)										
(4)										
Fotals (carry to Part II, line (5))	•	0.	ſ).						
(04) .0 . 41.113 11.10 (0//										Form 990-T (20

Form 990-T (2018) DENNIS & PHYLLIS WASHINGTON FOUNDATION

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	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 (column 6 minus column 5, but not more than column 4)
(1)	1					
(2)						
(3)						
(4)	1					
Totals from Part I	0.	0.				0
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	٥.	0.				0

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
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2018)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 18
BUSINESS ACTIVITY

THE PRIMARY UNRELATED BUSINESS ACTIVITY IS CONDUCTED WITHIN PASSIVE INVESTMENT PARTNERSHIPS IN WHICH THE DENNIS & PHYLLIS WASHINGTON FOUNDATION HOLDS AN INTEREST.

TO FORM 990-T, PAGE 1

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 19
DESCRIPTION	NET INCOME OR (LOSS)
ANTERO MIDSTREAM PARTNERS LP - OTHER INCOME (LOSS) ANDEAVOR LOGISTICS LP (FKA TESORO LOGISTICS LP) - OTHER	-71,494.
INCOME (LOSS)	-240,024.
BUCKEYE PARTNERS LP - OTHER INCOME (LOSS)	-82,302.
BP MIDSTREAM PARTNERS LP - OTHER INCOME (LOSS)	-11,637.
DOMINION MIDSTREAM PARTNERS LP - OTHER INCOME (LOSS)	-46,366.
ENERGY TRANSFER EQUITY LP - NET RENTAL REAL ESTATE INCOME	206.
ENERGY TRANSFER EQUITY LP - INTEREST INCOME	1,900.
ENERGY TRANSFER EQUITY LP - OTHER INCOME (LOSS)	-506,976.
ENERGY TRANSFER PARTNERS LP - NET RENTAL REAL ESTATE	
INCOME	-81,
ENERGY TRANSFER PARTNERS LP - INTEREST INCOME	2,997.
ENERGY TRANSFER PARTNERS LP - OTHER INCOME (LOSS)	-184,969.
ENTERPRISE PRODUCTS PARTNERS LP - OTHER INCOME (LOSS)	-306,367.
EQT GP HOLDINGS LP - OTHER INCOME (LOSS)	-5,134.
EQM MIDSTREAM PARTNERS LP - OTHER INCOME (LOSS)	-274,375.
GENESIS ENERGY LP - OTHER INCOME (LOSS)	-7,376.
MAGELLAN MIDSTREAM PARTNERS LP - OTHER INCOME (LOSS)	-166,134
MPLX LP - OTHER INCOME (LOSS)	-366,323
NOBLE MIDSTREAM PARTNERS LP - OTHER INCOME (LOSS)	-4,961
PLAINS ALL AMERICAN PIPELINE LP - OTHER INCOME (LOSS)	-264,957
SHELL MIDSTREAM PARTNERS LP - OTHER INCOME (LOSS)	-118,745
SPECTRA ENERGY PARTNERS LP - OTHER INCOME (LOSS)	-13,776
TALLGRASS ENERGY PARTNERS LP - OTHER INCOME (LOSS)	-6,038
VALERO ENERGY PARTNERS LP - OTHER INCOME (LOSS)	-22,437
WESTERN GAS EQUITY PARTNERS LP - OTHER INCOME (LOSS)	-19,620
WESTERN GAS PARTNERS LP - OTHER INCOME (LOSS)	-398,694,
WILLIAMS PARTNERS LP - NET RENTAL REAL ESTATE INCOME	-4,133
WILLIAMS PARTNERS LP - OTHER INCOME (LOSS)	-259,054,
PHILLIPS 66 PARTNERS LP - OTHER INCOME (LOSS)	-108,157,
FIRST LIGHT FOCUS FUND LP - OTHER INCOME (LOSS)	-53,
ENLINK MIDSTREAM PARTNERS LP - OTHER INCOME (LOSS) DCP MIDSTREAM LP - OTHER INCOME (LOSS)	-89,882, -15,743,
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	-3,590,705

DENNIS & PHYLLIS WASHINGTON FOUNDATION

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 20
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/12	136,868.	136,868.	0.	0.
12/31/13	1,047,177.	153,993.	893,184.	893,184.
12/31/14	980,242.	0.	980,242.	980,242.
12/31/15	1,473,167.	0.	1,473,167.	1,473,167.
12/31/16	1,448,933.	0.	1,448,933.	1,448,933.
NOL CARRYO	VER AVAILABLE THIS	YEAR	4,795,526.	4,795,526.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

DENNIS & PHYLLIS WASHINGTON FOUNDATION

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

Employer identification number

36-3606913 Part I Short-Term Capital Gains and Losses (See instructions.)

Part I Snort-Term Capital Ga	ins and Losses (See	instructions.)			
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gai	n .	(h) Gain or (loss) Subtract
This form may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	Cost (or other basis)	or loss from Form(s) 894 Part I, line 2, column (g		column (e) from column (d) and combine the result with column (g)
1a 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					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked	14,773.				14,773.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 3	7		4	
5 Short-term capital gain or (loss) from like-kind	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach comput	ation)			6	
7 Net short-term capital gain or (loss). Combin				7	14,773.
Part II Long-Term Capital Gai	ns and Losses (See	nstructions.)			T
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gar or loss from Form(s) 894 Part II, line 2, column (g	9,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g
8a 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					
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	996.				996
11 Enter gain from Form 4797, line 7 or 9				11	
12 Long-term capital gain from installment sales	from Form 6252, line 26 or 3	7		12	
13 Long-term capital gain or (loss) from like-kin	d exchanges from Form 8824			13	
14 Capital gain distributions				14	
15 Net long-term capital gain or (loss). Combine	e lines 8a through 14 in colum	n h		15	996
Part III Summary of Parts I and	d II				
16 Enter excess of net short-term capital gain (lii	ne 7) over net long-term capit	al loss (line 15)		16	14,773
17 Net capital gain. Enter excess of net long-term	n capital gain (line 15) over ne	t short-term capital loss (lin	e 7)	17	996.
18 Add lines 16 and 17. Enter here and on Form				18	15,769.
Note: If losses exceed gains, see Capital loss	es in the instructions.		'		

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2018

JWA

Department of the Treasury Internal Revenue Service

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. OMB No 1545-0074

Attachment Sequence No 12A

Name(s) shown on return

Social security number or taxpayer identification no.

DENNIS & PHYLLIS WASHINGTON 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

Part I Short-Term. Transact	ions involving capi	tal assets you held	1 year or less are ge	nerally short-term (se	e instructio	ns) For long-term	
transactions, see page 2 Note: You may aggregate al codes are required Enter th	e totals directly on	Schedule D. line 1.	a vou aren't required	i to report these tran	sactions on	Form 8949 (see inst	ructions)
You must check Box A, B, or C below. If you have more short-term transactions than w	Check only one h	ov if more than one h	ox annlies for your shor	t-term transactions com	plete a separ	ate Form 8949, page 1, f	or each applicable box
(A) Short-term transactions re	ported on Form(s) 1099-B showir	ng basis was repo	rted to the IRS (se	e Note ab	ove)	
(B) Short-term transactions re	ported on Form(s) 1099-B showir	ng basis wasn't re	ported to the IRS			
X (C) Short-term transactions no	ot reported to yo	u on Form 1099-	В				
1 (a)	(b)	(c)	(d)	(e)		nt, if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other		ou enter an amount (g), enter a code in	Gain or (loss).
(Example 100 sh. XYZ Co)	(Mo , day, yr)	disposed of	(sales price)	basis See the Note below and	column (f)	. See instructions.	Subtract column (e) from column (d) &
		(Mo , day, yr)		see Column (e) in	(f)	(g)	combine the result
				the instructions	Code(s)	Amount of adjustment	with column (g)
FIRST LIGHT FOCUS FUND LP	VARIOUS	VARIOUS	14,773.	0.		adjadanioni	14,773.
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2 Totals. Add the amounts in colu							
negative amounts) Enter each to							
Schedule D, line 1b (if Box A abo			14 883				14 777
above is checked), or line 3 (if B	ox C above is cl	necked)	14,773.	_		L	14,773.

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

Name(s) shown on return Name an	id SSN or taxpay	er identification i	no not required if	shown on page 1			ity number or ntification no.
DENNIS & PHYLLIS WAS	HINGTON FOUND	ATION				36-360	6913
Before you check Box D, E, or F be statement will have the same inform broker and may even tell you which	low, see whether nation as Form 10 box to check	you received an 199-B Either will	y Form(s) 1099-B show whether you	or substitute statei ur basis (usually yo	ment(s) from y ur cost) was re	our broker A seported to the	ubstitute IRS by your
Part II Long-Term. Transact		al assets you held	more than 1 year are	generally long-term	(see instruction:	s) For short-term	transactions,
see page 1 Note: You may aggregate a codes are required. Enter the	ne totals directly on	Schedule D. line 8	a vou aren't require	d to report these tran	sactions on For	m 8949 (see inst	ructions)
You must check Box D, E, or F below. If you have more long-term transactions than w	Check only one b	ox. If more than one b	ox applies for your long	-term transactions, comp	olete a separate Fo	orm 8949, page 2, fo	r each applicable box
(D) Long-term transactions re	· -						
(E) Long-term transactions re	ported on Form(s	s) 1099-B showin	ig basis wasn't re	ported to the IRS			
X (F) Long-term transactions no	ot reported to you	on Form 1099-	3	· · · · · · · · · · · · · · · · · · ·			
1 (a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed of (Mo, day, yr)	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see Column (e) in	loss. If you e in column (g), column (f). So	f any, to gain or nter an amount , enter a code in ee instructions. (g)	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result
				the instructions	Code(s)	Amount of adjustment	with column (g)
FIRST LIGHT FOCUS FUND LP	VARIOUS	VARIOUS	996.	0.			996.
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2 Totals. Add the amounts in colu	mns (d), (e), (a) a	and (h) (subtract			 		. ==
negative amounts) Enter each to							
Schedule D, line 8b (if Box D ab							
above is checked), or line 10 (if	Box F above is c	hecked)	996.				996.

Note: If you checked Box D 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