Form <b>990-T</b>	E	Exempt Orga				Гах Returr	1	OMB No. 1545-0687	
		(and proxy tax under section 6033(e))							
	For calendar year 2015 or other tax year beginning OCT 1, 2015, and ending SEP 30, 20							2015	
Department of the Treasury	► Information about Form 990-T and its instructions is available at www.irs.gov/form990t.							Cinen to Etiblic Iospection for	
Internal Revenue Service	<b>├</b>	Do not enter SSN numb				zation is a 501(c)(3)		501(c)(3) Organizations Only loyer identification number	
A Check box if address changed	Name of organization ( Check box if name changed and see instructions.)							(Employees' trust, see instructions.)	
B Exempt under section	Print		or Health,				02-0512290		
X 501(c)(3)	Type		m or suite no. If a P.O. bo					lated business activity codes instructions.)	
408(e) 220(e)			ıry Street,						
408A 530(a)	1		ovince, country, and ZIP o	or foreig	n postal code				
529(a)		Concord, NH					525	990	
C Book value of all assets at end of year $80,290,989$ .	F Group	exemption number (See	instructions.)	<u> </u>					
					501(c) trust	401(a) trust		Other trust	
H Describe the organization									
		oration a subsidiary in an	- · · · · · · · · · · · · · · · · · · ·	nt-subs	idiary controlled group?	<b>&gt;</b> L	Y	es X No	
		tifying number of the pare					0.0	000 0440	
J The books are in care o						one number > 6			
<u> </u>		de or Business Inc	come		(A) Income	(B) Expenses		(C) Net	
1a Gross receipts or sal									
b Less returns and allo		A (1 - 7)	c Balance ▶	1c					
		A, line 7)		2					
3 Gross profit. Subtrac		***********	***************************************	3 4a					
		h Schedule D)		4a 4b			1,3-1,-1,-1		
		art II, line 17) (attach Form		-					
c Capital loss deduction function (loss) from (	if lui lius	ips and S corporations (at	toch atatament\	4c 5	-18,782.			-18,782.	
6 Rent income (Sched		3 corporations (at	• • • • • • • • • • • • • • • • • • • •	6	-10,702.	***************************************	**************************************	-10,702.	
		ne (Schedule E)		7					
		nd rents from controlled o		8					
		in 501(c)(7), (9), or (17) o		<u> </u>					
		me (Schedule I)		10		· · · · · · · · · · · · · · · · · · ·			
		1)		11					
12 Other income (See in	struction	s' attach schedule)		12					
12 Other income (See instructions; attach schedule) 12 Total. Combine lines 3 through 12 13 -18,							1	-18,782.	
		t Taken Elsewhe						10,,021	
		itions, deductions mus				s income.)			
14 Compensation of of	ficers, dir	ectors, and trustees (Scho	edule K)				14		
							15		
16 Repairs and mainter							16		
17 Bad debts							17		
							18		
19 Taxes and licenses		*				F	19		
20 Charitable contribut	ions (See	instructions for limitation	rules)		,		20		
21 Depreciation (attach	Form 45	62)			21				
22 Less depreciation of	aimed on	Schedule A and elsewher	e on return		22a		22b		
23 Depletion		********					23		
24 Contributions to def	erred con	npensation plans					24		
25 Employee benefit pr	24 Contributions to deferred compensation plans 25 Employee benefit programs						25		
26 Excess exempt expe									
27 Excess readership of									
28 Other deductions (at									
29 Total deductions	. Add line	es 14 through 28					29	0.	
		come before net operating					30	-18,782.	
31 Net operating loss d	eduction	(limited to the amount on	line 30)		• • • • • • • • • • • • • • • • • • • •		31		
		come before specific dedu					32	-18,782.	
		\$1,000, but see line 33 in					33	1,000.	
		income, Subtract line 33 f	•	•	•			10 500	
7.00.704				• • • • • • • • • • • • • • • • • • • •			34	-18,782.	
01-06-16 LHA For Pap	erwork P	leduction Act Notice, see	instructions.					Form <b>990-T</b> (2015)	

Schedule C - Rent Inc	ome (Fi	rom Real	Proper	ty and	d Personal	Propert	y Lease	ed With Real F	rope	erty)(see instructions)
1. Description of property			•							
(1)										
(2)										
(3)										
(4)										
	2	. Rent receiv	ed or accrue	d						
(a) From personal property rent for personal propert 10% but not more	ly is more tha		(b) Fr	rent for p	nd personal prope ersonal property e t is based on profi	xceeds 50% o	entage or if	3(a) Deductions dir columns 2(	ectly co a) and 2	nnected with the income in 2(b) (attach schedule)
(1)										
(2)										
(3)										
(4)										
Total		0.	Total				0.	/EX Total ( dod., etc.,	_	
(c) Total income. Add totals of co								(b) Total deductions Enter here and on page	1.	•
here and on page 1, Part I, line 6,							0.	Part I, line 6, column (B)	▶	· 0.
Schedule E - Unrelate	d Dept-	Financed	Incom	e (see	instructions)			0 - 1 - 1 - 1		
					2. Gross in	come from		<ol><li>Deductions directly to debt-fit</li></ol>	connec nanced	property
1. Description of	of debt-financ	ed property			or allocabl financed	le to debt-	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)
(1)										
(2)										
(3)		•								
(4)										
4. Amount of average acquisition 5. Average debt on or allocable to debt-financed of or a property (attach schedule) debt-fina		adjusted bas illocable to nced property s schedule)		6. Column 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)						%				
(2)					<u> </u>	%				
(3)			· · · · · · · · · · · · · · · · · · ·			%				
(4)		•				%			1	
	<b>,</b>				******			ter here and on page 1, art I, line 7, column (A).		Enter here and on page 1, Part I, line 7, column (B).
Totals							▶		0.	0.
Total dividends-received deduc	tions includ	led in column	8						.▶	0.
Schedule F - Interest,	Annuitie	es, Royal						nizations (see in	nstruc	ctions)
				Exemp	t Controlled C	)rganizatio	ns			
1. Name of controlled organizar	tion	Employer ide numb	entification		3. related income see instructions)		4. f specified ints made	<ol> <li>Part of column 4 included in the con organization's gross</li> </ol>	troming	connected with income
(1)										
(2)										
(3)										
(4)										
Nonexempt Controlled Organi	zations									
7. Taxable Income 8. Net unrelated income (loss) 9. To (see instructions)		<b>9</b> . Tot	made in the con		in the contr			Deductions directly connected with income in column 10		
(1)										
(2)										
(3)										
(4)										
							Enter here a	lumns 5 and 10. and on page 1, Part I, B, column (A).	Ent	Add columns 6 and 11. ter here and on page 1, Part i, line 8, column (B).
T-4-1-										
Totals						🖊		0.		0. Form 000-T/2015)
23721 01-06-16										Form 990-T (2015)

FURIT 990-1 (2015) ETTCOM	ment for a	earth,	IIIC.			0.2	7-031773	o Page
Schedule G - Investm (see in	nent Income of structions)	a Section	501(c)(	7), (9), or (17) O	rganiza	tion		
1. De	escription of income			2. Amount of income	directly	ductions connected schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)					,			(con a prince con sy
(2)								
(3)							·······	·····
(4)								
				Enter here and on page 1, Part I, line 9, column (A).				Enter here and on page 1 Part I, line 9, column (B).
Totals			<b>&gt;</b>	0.	2			0.
Schedule I - Exploited (see inst	d Exempt Activ tructions)	ity Income	e, Othei	r Than Advertis	ing Inc	ome		
1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expr directly co with prod of unre business	nnected duction lated	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	from ac	es income tivity that unrelated es income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						İ		
(2)								
(3)								
(4)								
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here page 1, line 10, c	Part I, ol. (B).					Enter here and on page 1, Part II, line 26.
Totals	0		0 •					0.
Schedule J - Advertis				nalidated Basis				
Part I Income From	Periodicais Re	portea on	a Con	solidated basis	į			
	1			·				
1. Name of periodical	2. Gross advertisin income	, I '	Direct tising costs	4. Advertising gain or (loss) (col. 2 minus col. 3), If a gain, compu cofs. 5 through 7.		irculation come	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)					(100 (100)			
(2)								
(3)				Manuscript of the second of th	manage ma ma ma ma ma ma ma ma ma ma ma ma ma			
(4)					10 10 10 10 10 10 10 10 10 10 10 10 10 1			
Totals (carry to Part II, line (5))	►	0.	0					0.
Part II Income From			a Sepa	arate Basis (For	each perio	odical listed in	Part II, fill in	
columns 2 throug	h 7 on a line-by-line	basis.)						
1. Name of periodical	2. Gross advertisin Income		Direct lising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compucols. 5 through 7.	5. Ci	rculation come	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
Totals from Part I	▶	0.	0					0.
Totals, Part II (lines 1-5)	Enter here an page 1, Par line 11, cot.	tl, page	nere and on 1, Part I, 1, col. (B).					Enter here and on page 1, Part II, line 27.
Schedule K - Comper					instructio	ns)		0.
	Name	510, Direc	1010, 011	2. Title	11011110110	3. Percent of time devoted to business		nsation attributable lated business
(1)							%	
(2)			1				%	
			<u> </u>				%	
(3)							%	
(4) Total. Enter here and on page 1,	Dart II ling 14		<u> </u>			<u> </u>	<del>/</del> 0	0.
TOTAL, EINST BOTS AND ON PAGE 1,	εαιτη <sub>ς</sub> 1610 14		**************					

523731 01-06-10 Form **990-T** (2015)

Form 990-T Income (Loss)	from Partners	ships	Statement	20
Partnership Name	Gross Income	Deductions	Net Incom or (Loss	
Legacy Venture VI (QP), LLC AG Realty Fund IX LP Legacy Venture VII, LLC RCP Fund IX, LP	-47. -5,780. 78. -13,028.	5. 0. 0.	-5,7	78.
Total to Form 990-T, Page 1, line 5	-18,777.	5.	-18,7	82.

(Rev. December 2013) Department of the Treasury Internal Revenue Service

## Return by a U.S. Transferor of Property

to a Foreign Corporation

▶ Information about Form 926 and its separate instructions is at www.irs.gov/form926. ► Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. 128

Part U.S. Transferor Information (see instructions)	
Name of transferor	Identifying number (see instructions)
Endowment For Health, Inc.	, i
	02-0512290
1 If the transferor was a corporation, complete questions 1a through 1d.	
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by 5	or
fewer domestic corporations?	
b Did the transferor remain in existence after the transfer?	
If not, list the controlling shareholder(s) and their identifying number(s):	
Thought the controlling state folder (a) and area stating frameworks.	
Controlling shareholder	Identifying number
c If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporati	ion? Yes X No
If not, list the name and employer identification number (EIN) of the parent corporation:	ioni
if not, list the name and employer identification number (Liny of the parent corporation.	
Name of parent corporation	EIN of parent corporation
d. Have basis adjustments under section 267/pl/S) been made?	Yes X No
d Have basis adjustments under section 367(a)(5) been made?	Tes (AL NO
1 If the transferor was a partner is a partner ship that was the cast of transferor (but is not transfer as gual was	der gestien 267) - complete
2 If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such unc	der section 507), complete
questions 2a through 2d.	
a List the name and EIN of the transferor's partnership:	
Name of partnership	EIN of partnership
L Did the manufacture is a second of the first feet of the second of the	Yes X No
b Did the partner pick up its pro rata share of gain on the transfer of partnership assets?	
c Is the partner disposing of its entire interest in the partnership?	Yes A No
d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established	Yes X No
securities market?  Part II Transferee Foreign Corporation Information (see instructions)	Yes X No
	T
3 Name of transferee (foreign corporation)	4a Identifying number, if any
AC Doolton IV Inscription I D	00 1105000
AG Realty IX Investments, LP	98-1195882
5 Address (including country)	4b Reference ID number
199 Bay St., Commerce CT. W. C/O 152928 Canada Inc. Suit	
Toronto, Ontario M5L 1B9 CA Canada	
6 Country code of country of incorporation or organization	
CA	
7 Foreign law characterization (see instructions)	
Corporation	
8 Is the transferee foreign corporation a controlled foreign corporation?	X Yes No
LHA For Paperwork Reduction Act Notice, see separate instructions.	Form <b>926</b> (Rev. 12-2013)
524531 04-01-15	

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	12/31/2015		214,125.		
Stock and					
securities			<u> </u>		
1					
Installment obligations, account receivables or					
similar property					
Foreign currency or other					
property denominated in					
foreign currency					
Inventory					
Assets subject to					
depreciation recapture					
(see Temp. Regs. sec.	-				
1.367(a)-4T(b)) L'angible property used in					
trade or business not listed					
under another category					
ntangible					
property					
Property to be leased					
as described in final					
and temp. Regs. sec.					
1.367(a)-4(c)) Property to be sold					, ,, ,,
as described in		····			
remp. Regs. sec.					
1.367(a)-4T(d))					
Fransfers of oil and gas					
working interests (as					
described in Temp.					
Regs. sec. 1.367(a) 4T(e))					
Other property					
			1		

ouppiemental information required to be	e rroported (see instructions).	
		A_AAMITT

Form 926 (Rev. 12-2013)

	1926 (Hev. 12-2013) Endowmente Tot nearen, The	<u> </u>	, rage o
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)	_	
9	Enter the transferor's interest in the foreign transferee corporation before and after the transfer:		
	(a) Before $2.5559$ % (b) After $4.3122$ %		
10	Type of nonrecognition transaction (see instructions) ▶ IRC Section 351		
11	Indicate whether any transfer reported in Part III is subject to any of the following:		
а	Gain recognition under section 904(f)(3)	Yes	X No
b	Gain recognition under section 904(f)(5)(F)	Yes	X No
С	Recapture under section 1503(d)	Yes	X No
d	Exchange gain under section 987	Yes	X No
12	Did this transfer result from a change in the classification of the transferee to that of a foreign corporation?	Yes	X No
13	Indicate whether the transferor was required to recognize income under final and Temporary Regulations sections		
	1.367(a)-4 through 1.367(a)-6 for any of the following:		[ <del></del>
а	Tainted property		X No
b	Depreciation recapture	Yes	X No
С	* *************************************		X No
d	Any other income recognition provision contained in the above-referenced regulations	Yes	X No
			[
14	Did the transferor transfer assets which qualify for the trade or business exception under section 367(a)(3)?	Yes	X No
15 a	Did the transferor transfer foreign goodwill or going concern value as defined in Temporary Regulations section		[ <del></del> ]
	1.367(a)·1T(d)(5)(iii)?	Yes	X No
b	If the answer to line 15a is "Yes," enter the amount of foreign goodwill or going concern value		
	transferred \$		
		X Yes	
16	Was cash the only property transferred?	LAL Yes	Ll No
		Yes	X No
17 a	Was intangible property (within the meaning of section 936(h)(3)(B)) transferred as a result of the transaction?	L Yes	L <u>A</u> ⊥ NO
1.	16 N/ # -t		
a	If "Yes," describe the nature of the rights to the intangible property that was transferred as a result of the		
	transaction:		
	···		
		Form 926 (R	lev. 12-2013)
		1 01111 0=0 (11	