

Product: **Partnership**
 Name: **RAPHA CAPITAL PE LIFE SCIENCES FUND VI LP**
 FEIN: *******1591**
 Bank Info:
 Fiscal Year Begin Date: **1/1/2022**
 IRS Message:

Category:
 Plan Number:
 Fiscal Year End Date: **12/31/2022**

IRS Center: **Ogden**
 e-Postmark: **4/15/2023 2:07 PM**
 Notification: **Email**
 eSigned:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
02/16/2023	22P:604311:V1	Upload Started			Grooms,Cassie	
02/16/2023	22P:604311:V1	Ready to Release by Customer				
04/15/2023	22P:604311:V1	Released for Transmission - Validation in Progress			Perry, Kimberly	
04/15/2023	22P:604311:V1	Ready to transmit - Validation Complete				
04/15/2023	22P:604311:V1	Transmitted to FD	76685520231050374c44			
04/15/2023	22P:604311:V1	Accepted by FD on 4/15/2023				

ID	Status Date	Status	State/Other	State Category	FBAR	FBAR BSA ID
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CLIENT'S COPY



SPAIN PRICE READER
& THOMPSON, P.C.
ACCOUNTANTS & BUSINESS CONSULTANTS

FEBRUARY 16, 2023

RAPHA CAPITAL PE LIFE SCIENCES
FUND VI LP
9511 COLLINS AVE #1403
SURFSIDE, FL 33154

RAPHA CAPITAL PE LIFE SCIENCES :

ENCLOSED IS YOUR 2022 PARTNERSHIP TAX RETURN, AS FOLLOWS...

2022 U.S. RETURN OF PARTNERSHIP INCOME

WE PREPARED THE RETURN FROM INFORMATION YOU FURNISHED US WITHOUT VERIFICATION. UPON EXAMINATION OF THE RETURN BY TAXING AUTHORITIES, REQUESTS MAY BE MADE FOR UNDERLYING DATA. WE THEREFORE RECOMMEND THAT YOU PRESERVE ALL RECORDS WHICH YOU MAY BE CALLED UPON TO PRODUCE IN CONNECTION WITH SUCH AN EXAMINATION.

THE RETURN WAS PREPARED FROM THE INFORMATION FURNISHED BY YOU. PLEASE REVIEW BEFORE FILING TO ENSURE THERE ARE NO OMISSIONS OR MISSTATEMENTS OF MATERIAL FACTS.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX RETURN.

YOUR COPY SHOULD BE RETAINED FOR YOUR FILES.

VERY TRULY YOURS,

SPAIN, PRICE, READER & THOMPSON, P.C.

2022 TAX RETURN FILING INSTRUCTIONS

U.S. RETURN OF PARTNERSHIP INCOME

FOR THE YEAR ENDING

DECEMBER 31, 2022

PREPARED FOR:

RAPHA CAPITAL PE LIFE SCIENCES
FUND VI LP
9511 COLLINS AVE #1403
SURFSIDE, FL 33154

PREPARED BY:

SPAIN, PRICE, READER & THOMPSON, PC
5300 MEMORIAL DR. STE. 940
HOUSTON, TX 77007

TO BE SIGNED AND DATED BY:

A GENERAL PARTNER

AMOUNT OF TAX:

NOT APPLICABLE

MAIL TAX RETURN TO:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. AFTER REVIEWING YOUR RETURN FOR COMPLETENESS AND ACCURACY, PLEASE SIGN FORM 8879-PE AND CONTACT OUR OFFICE TO CONFIRM THAT YOUR RETURN CAN BE FILED ELECTRONICALLY.

FORMS TO BE DISTRIBUTED TO PARTNERS:

ENCLOSED ARE COPIES OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE PARTNERS.

RETURN MUST BE MAILED ON OR BEFORE:

RETURN FEDERAL FORM 8879-PE TO US BY MARCH 15, 2023.

SPECIAL INSTRUCTIONS:

DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE IRS.

YOU SHOULD PROVIDE A PAPER COPY OF THESE SCHEDULES K-1 TO EACH OF THE PARTNERS IMMEDIATELY. IF YOU CHOOSE TO DISTRIBUTE THESE SCHEDULES ELECTRONICALLY, YOU MUST DISTRIBUTE THEM IN ACCORDANCE WITH THE SPECIFIC REQUIREMENTS CONTAINED IN IRS REVENUE PROCEDURE 2012-17. PLEASE CONTACT US IF YOU NEED ASSISTANCE REGARDING THESE REQUIREMENTS.

Form **8879-PE**

Department of the Treasury
Internal Revenue Service

E-file Authorization for Form 1065
(For return of partnership income or administrative adjustment request)
ERO must obtain and retain completed Form 8879-PE.
Go to www.irs.gov/Form8879PE for the latest information.

For calendar year 2022, or tax year beginning _____, 2022, ending _____, 20____

OMB No. 1545-0123

2022

Name of partnership **RAPHA CAPITAL PE LIFE SCIENCES
FUND VI LP**

Employer identification number
88-3291591

Part I Form 1065 Information (Whole dollars only)

1	Gross receipts or sales less returns and allowances (Form 1065, line 1c)	1	
2	Gross profit (Form 1065, line 3)	2	
3	Ordinary business income (loss) (Form 1065, line 22)	3	
4	Net rental real estate income (loss) (Form 1065, Schedule K, line 2)	4	
5	Other net rental income (loss) (Form 1065, Schedule K, line 3c)	5	

Part II Declaration and Signature Authorization of Partner or Member or Partnership Representative

I declare under penalties of perjury that:

- 1a. If the Form 1065 is being transmitted as part of a return of partnership income, I am a partner or member of the named partnership.
- b. If the Form 1065 is being transmitted as part of an administrative adjustment request (AAR), I am the partnership representative (PR) of the named partnership.
2. I have examined a copy of the partnership's electronic Form 1065 (whether used as return or AAR) and accompanying forms, schedules, and statements, and to the best of my knowledge and belief, it/they is/are true, correct, and complete.
3. I am fully authorized to sign the return or AAR on behalf of the partnership.
4. The amounts shown in Part I above are the amounts shown on the electronic copy of the partnership's Form 1065.
5. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to transmit the partnership's return or AAR to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission and (b) the reason for any delay in processing the return or AAR.
6. I have selected a personal identification number (PIN) as my signature for the partnership's electronic return of partnership income or AAR.

Partner's or Member or PR PIN: check one box only

I authorize **SPAIN, PRICE, READER & THOMPSON, PC** to enter my PIN **04310**
ERO firm name **Don't enter all zeros**
as my signature on the partnership's 2022 electronically filed return of partnership income or AAR.

As a Partner or Member or PR of the partnership, I will enter my PIN as my signature on the partnership's 2022 electronically filed return of partnership income or AAR..

Partner or Member or PR signature: _____
Title: **MEMBER** Date: _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. **76685529203**
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return of partnership income or AAR for the partnership indicated above. I confirm that I am submitting this return or AAR in accordance with the requirements of **Pub. 3112**, IRS *e-file* Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature: **CASSIE GROOMS** Date: **02/16/23**

ERO Must Retain This Form - See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.

Form **8879-PE** (2022)

U.S. Return of Partnership Income

Department of the Treasury
Internal Revenue Service

For calendar year 2022, or tax year beginning _____, _____, ending _____, _____
Go to www.irs.gov/Form1065 for instructions and the latest information.

2022

A Principal business activity INVESTMENTS	Type or Print	Name of partnership RAPHA CAPITAL PE LIFE SCIENCES FUND VI LP	D Employer identification number 88-3291591
B Principal product or service INVESTMENTS		Number, street, and room or suite no. If a P.O. box, see instructions. 9511 COLLINS AVE #1403	E Date business started 08/30/2022
C Business code number 525990		City or town, state or province, country, and ZIP or foreign postal code SURFSIDE FL 33154	F Total assets (see instr.) \$ 1,110,116.

G Check applicable boxes: (1) Initial return (2) Final return (3) Name change (4) Address change (5) Amended return

H Check accounting method: (1) Cash (2) Accrual (3) Other (specify) _____

I Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year **3**

J Check if Schedules C and M-3 are attached

K Check if partnership: (1) Aggregated activities for section 465 at-risk purposes (2) Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 22 below. See instructions for more information.

Income	1 a Gross receipts or sales	1a	
	b Returns and allowances	1b	
	c Balance. Subtract line 1b from line 1a		1c
	2 Cost of goods sold (attach Form 1125-A)		2
	3 Gross profit. Subtract line 2 from line 1c		3
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)		4
	5 Net farm profit (loss) (attach Schedule F (Form 1040))		5
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)		6
7 Other income (loss) (attach statement)		7	
8 Total income (loss). Combine lines 3 through 7		8	
Deductions (see instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)		9
	10 Guaranteed payments to partners		10
	11 Repairs and maintenance		11
	12 Bad debts		12
	13 Rent		13
	14 Taxes and licenses		14
	15 Interest (see instructions)		15
	16 a Depreciation (if required, attach Form 4562)	16a	
	b Less depreciation reported on Form 1125-A and elsewhere on return	16b	16c
	17 Depletion (Do not deduct oil and gas depletion.)		17
	18 Retirement plans, etc.		18
19 Employee benefit programs		19	
20 Other deductions (attach statement)		20	
21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20		21	
22 Ordinary business income (loss). Subtract line 21 from line 8		22	0.
Tax and Payment	23 Interest due under the look-back method-completed long-term contracts (attach Form 8697)		23
	24 Interest due under the look-back method-income forecast method (attach Form 8866)		24
	25 BBA AAR imputed underpayment (see instructions)		25
	26 Other taxes (see instructions)		26
	27 Total balance due. Add lines 23 through 26		27
	28 Payment (see instructions)		28
	29 Amount owed. If line 28 is smaller than line 27, enter amount owed		29
	30 Overpayment. If line 28 is larger than line 27, enter overpayment		30

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than partner or limited liability company member) is based on all information of which preparer has any knowledge.

Signature of partner or limited liability company member _____ Date _____

May the IRS discuss this return with the preparer shown below? See instr. **Yes** **No**

Paid Preparer Use Only	Print/Type preparer's name CASSANDRA GROOMS	Preparer's signature CASSANDRA GROOMS	Date 02/16/23	Check <input type="checkbox"/> if self-employed	PTIN P00929203
	Firm's name SPAIN, PRICE, READER & THOMPSON, PC			Firm's EIN 74-1663570	
	Firm's address 5300 MEMORIAL DR. STE. 940 HOUSTON, TX 77007			Phone no. (713) 520-1850	

Schedule B Other Information

1 What type of entity is filing this return? Check the applicable box:					
a	<input type="checkbox"/> Domestic general partnership	b	<input checked="" type="checkbox"/> Domestic limited partnership		
c	<input type="checkbox"/> Domestic limited liability company	d	<input type="checkbox"/> Domestic limited liability partnership		
e	<input type="checkbox"/> Foreign partnership	f	<input type="checkbox"/> Other		
2 At the end of the tax year:					
a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization, or any foreign government own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership				X	
b Did any individual or estate own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership? For rules of constructive ownership, see instructions. If "Yes," attach Schedule B-1, Information on Partners Owning 50% or More of the Partnership					X
3 At the end of the tax year, did the partnership:					
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of stock entitled to vote of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (iv) below					X
(i) Name of Corporation		(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage Owned in Voting Stock	
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below					X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital	
4 Does the partnership satisfy all four of the following conditions?					
a The partnership's total receipts for the tax year were less than \$250,000.					
b The partnership's total assets at the end of the tax year were less than \$ 1 million.					
c Schedules K-1 are filed with the return and furnished to the partners on or before the due date (including extensions) for the partnership return.					
d The partnership is not filing and is not required to file Schedule M-3 If "Yes," the partnership is not required to complete Schedules L, M-1, and M-2; item F on page 1 of Form 1065; or item L on Schedule K-1.					X
5 Is this partnership a publicly traded partnership, as defined in section 469(k)(2)?					X
6 During the tax year, did the partnership have any debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?					X
7 Has this partnership filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide information on any reportable transaction?					X
8 At any time during calendar year 2022, did the partnership have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country					X
9 At any time during the tax year, did the partnership receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," the partnership may have to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts. See instructions					X
10 a Is the partnership making, or had it previously made (and not revoked), a sec. 754 election? See instr. for details regarding a sec. 754 election ...					X
b Did the partnership make for this tax year an optional basis adjustment under section 743(b) or 734(b)? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instructions					X
c Is the partnership required to adjust the basis of partnership assets under section 743(b) or 734(b) because of a substantial built-in loss (as defined under section 743(d)) or substantial basis reduction (as defined under section 734(d))? If "Yes," attach a statement showing the computation and allocation of the basis adjustment. See instruction					X

Schedule B Other Information (continued)		Yes	No
11	Check this box if, during the current or prior tax year, the partnership distributed any property received in a like-kind exchange or contributed such property to another entity (other than disregarded entities wholly owned by the partnership throughout the tax year) <input type="checkbox"/>		
12	At any time during the tax year, did the partnership distribute to any partner a tenancy-in-common or other undivided interest in partnership property?		X
13	If the partnership is required to file Form 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), enter the number of Forms 8858 attached. See instructions		
14	Does the partnership have any foreign partners? If "Yes," enter the number of Forms 8805, Foreign Partner's Information Statement of Section 1446 Withholding Tax, filed for this partnership		X
15	Enter the number of Forms 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships, attached to this return		
16 a	Did you make any payments in 2022 that would require you to file Form(s) 1099? See instructions	X	
b	If "Yes," did you or will you file required Form(s) 1099?	X	
17	Enter the number of Forms 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations, attached to this return		
18	Enter the number of partners that are foreign governments under section 892		
19	During the partnership's tax year, did the partnership make any payments that would require it to file Form 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474)?		X
20	Was the partnership a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938		X
21	Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?		X
22	During the tax year, did the partnership pay or accrue any interest or royalty for which one or more partners are not allowed a deduction under section 267A? See instructions If "Yes," enter the total amount of the disallowed deductions \$		X
23	Did the partnership have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		X
24	Does the partnership satisfy one or more of the following? See instructions a The partnership owns a pass-through entity with current, or prior year carryover, excess business interest expense. b The partnership's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$27 million and the partnership has business interest expense. c The partnership is a tax shelter (see instructions) and the partnership has business interest expense. If "Yes" to any, complete and attach Form 8990.		X
25	Is the partnership attaching Form 8996 to certify as a Qualified Opportunity Fund? If "Yes," enter the amount from Form 8996, line 15 \$		X
26	Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership Complete Schedule K-3 (Form 1065), Part XIII, for each foreign partner subject to section 864(c)(8) on a transfer or distribution.		
27	At any time during the tax year, were there any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8?		X
28	Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties constituting a trade or business of your partnership, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the partners held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions. Percentage: By vote By value		X
29	Reserved for future use		
30	Is the partnership electing out of the centralized partnership audit regime under section 6221(b)? See instructions If "Yes," the partnership must complete Sch. B-2 (Form 1065). Enter the total from Sch. B-2, Part III, line 3 If "No," complete Designation of Partnership Representative below.		X

Designation of Partnership Representative (see instructions)

Enter below the information for the partnership representative (PR) for the tax year covered by this return.

Name of PR RAPHA CAPITAL MANAGEMENT LLC			
U.S. address of PR	9511 COLLINS AVENUE APT 1403 SURFSIDE, FL 33154	U.S. phone number of PR	3058096920
If the PR is an entity, name of the designated individual for the PR KEVIN SLAWIN			
U.S. address of designated individual	9511 COLLINS AVENUE APT 1403 SURFSIDE, FL 33154	U.S. phone number of designated individual	3058096920

Schedule K Partners' Distributive Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 22)	1	0.
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss)	3a	
	b Expenses from other rental activities (attach statement)	3b	
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Guaranteed payments: a Services 4a b Capital 4b	4	
	c Total. Add lines 4a and 4b	4c	
	5 Interest income SEE STATEMENT 1	5	9,376.
	6 Dividends and dividend equivalents: a Ordinary dividends	6a	
	b Qualified dividends 6b c Dividend equivalents 6c	6	
	7 Royalties	7	
8 Net short-term capital gain (loss) (attach Schedule D (Form 1065))	8		
9a Net long-term capital gain (loss) (attach Schedule D (Form 1065))	9a		
b Collectibles (28%) gain (loss)	9b		
c Unrecaptured section 1250 gain (attach statement)	9c		
10 Net section 1231 gain (loss) (attach Form 4797)	10		
11 Other income (loss) (see instructions) Type	11		
Deductions	12 Section 179 deduction (attach Form 4562)	12	
	13a Contributions	13a	
	b Investment interest expense	13b	
	c Section 59(e)(2) expenditures: (1) Type (2) Amount	13c(2)	
d Other deductions (see instructions) Type STMT 2	13d	15,982.	
Self-Employment	14a Net earnings (loss) from self-employment	14a	0.
	b Gross farming or fishing income	14b	
	c Gross nonfarm income	14c	
Credits	15a Low-income housing credit (section 42(j)(5))	15a	
	b Low-income housing credit (other)	15b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	15c	
	d Other rental real estate credits (see instructions) Type	15d	
	e Other rental credits (see instructions) Type	15e	
	f Other credits (see instructions) Type	15f	
Inter-national	16 Attach Schedule K-2 (Form 1065), Partners' Distributive Share Items-International, and check this box to indicate that you are reporting items of international tax relevance <input type="checkbox"/>		
Alternative Tax Minimum (AMT) Items	17a Post-1986 depreciation adjustment	17a	
	b Adjusted gain or loss	17b	
	c Depletion (other than oil and gas)	17c	
	d Oil, gas, and geothermal properties - gross income	17d	
	e Oil, gas, and geothermal properties - deductions	17e	
	f Other AMT items (attach statement)	17f	
Other Information	18a Tax-exempt interest income	18a	
	b Other tax-exempt income	18b	
	c Nondeductible expenses	18c	
	19a Distributions of cash and marketable securities	19a	
	b Distributions of other property	19b	
	20a Investment income	20a	9,376.
	b Investment expenses	20b	15,982.
c Other items and amounts (attach statement)			
21 Total foreign taxes paid or accrued	21		

Analysis of Net Income (Loss) per Return

1 Net income (loss). Combine Schedule K, lines 1 through 11. From the result, subtract the sum of Schedule K, lines 12 through 13d, and 21					1	-6,606.
2 Analysis by partner type:	(i) Corporate	(ii) Individual (active)	(iii) Individual (passive)	(iv) Partnership	(v) Exempt Organization	(vi) Nominee/Other
a General partners						-66.
b Limited partners				-6,540.		

Schedule L Balance Sheets per Books

Assets	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
1 Cash				19,740.
2a Trade notes and accounts receivable				
b Less allowance for bad debts				
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities				
6 Other current assets (attach statement)				
7a Loans to partners (or persons related to partners)				
b Mortgage and real estate loans				
8 Other investments (attach statement)	STATEMENT 3			1,070,000.
9a Buildings and other depreciable assets				
b Less accumulated depreciation				
10a Depletable assets				
b Less accumulated depletion				
11 Land (net of any amortization)				
12a Intangible assets (amortizable only)				
b Less accumulated amortization				
13 Other assets (attach statement)	STATEMENT 4			20,376.
14 Total assets		0.		1,110,116.
Liabilities and Capital				
15 Accounts payable				5,622.
16 Mortgages, notes, bonds payable in less than 1 year				
17 Other current liabilities (attach statement)				
18 All nonrecourse loans				
19a Loans from partners (or persons related to partners)				
b Mortgages, notes, bonds payable in 1 year or more				
20 Other liabilities (attach statement)				
21 Partners' capital accounts				1,104,494.
22 Total liabilities and capital		0.		1,110,116.

Schedule M-1 Reconciliation of Income (Loss) per Books With Analysis of Net Income (Loss) per Return

Note: The partnership may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books	-6,606.	6 Income recorded on books this year not included on Schedule K, lines 1 through 11 (itemize):	
2 Income included on Schedule K, lines 1, 2, 3c, 5, 6a, 7, 8, 9a, 10, and 11, not recorded on books this year (itemize):		a Tax-exempt interest \$	
3 Guaranteed payments (other than health insurance)		7 Deductions included on Schedule K, lines 1 through 13d, and 21, not charged against book income this year (itemize):	
4 Expenses recorded on books this year not included on Schedule K, lines 1 through 13d, and 21 (itemize):		a Depreciation \$	
a Depreciation \$		8 Add lines 6 and 7	
b Travel and entertainment \$		9 Income (loss) (Analysis of Net Income (Loss), line 1). Subtract line 8 from line 5	-6,606.
5 Add lines 1 through 4	-6,606.		

Schedule M-2 Analysis of Partners' Capital Accounts

1 Balance at beginning of year		6 Distributions: a Cash	
2 Capital contributed: a Cash	1,111,100.	b Property	
b Property		7 Other decreases (itemize):	
3 Net income (loss) (see instructions)	-6,606.	8 Add lines 6 and 7	
4 Other increases (itemize):		9 Balance at end of year. Subtract line 8 from line 5	1,104,494.
5 Add lines 1 through 4	1,104,494.		

**SCHEDULE B-1
(Form 1065)**

(Rev. August 2019)
Department of the Treasury
Internal Revenue Service

**Information on Partners Owning 50% or
More of the Partnership**

▶ Attach to Form 1065.

OMB No. 1545-0123

▶ Go to www.irs.gov/Form1065 for the latest information.

Name of partnership RAPHA CAPITAL PE LIFE SCIENCES FUND VI LP	Employer identification number 88-3291591
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Part I Entities Owning 50% or More of the Partnership (Form 1065, Schedule B, Question 2a (Question 3a for 2009 through 2017))

Complete columns (i) through (v) below for any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, tax-exempt organization, or any foreign government that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital
MCGUYER INVESTMENTS LTD	43-2056500	PARTNERSHIP	UNITED STATES	90.00

Part II Individuals or Estates Owning 50% or More of the Partnership (Form 1065, Schedule B, Question 2b (Question 3b for 2009 through 2017))

Complete columns (i) through (iv) below for any individual or estate that owns, directly or indirectly, an interest of 50% or more in the profit, loss, or capital of the partnership (see instructions).

(i) Name of Individual or Estate	(ii) Identifying Number (if any)	(iii) Country of Citizenship (see instructions)	(iv) Maximum Percentage Owned in Profit, Loss, or Capital

SCHEDULE K	INTEREST INCOME	STATEMENT 1
DESCRIPTION	U.S. BONDS	OTHER
PORTFOLIO INTEREST INCOME: 3D BIO H		5,647.
PORTFOLIO INTEREST INCOME: IMAGIN M		2,444.
PORTFOLIO INTEREST INCOME: PONCE TH		1,285.
TOTAL TO SCHEDULE K, LINE 5		9,376.

SCHEDULE K	DEDUCTIONS RELATED TO PORTFOLIO INCOME	STATEMENT 2
DESCRIPTION		AMOUNT
FILING FEES		2,360.
FUND ADMINISTRATION FEES		8,000.
MANAGEMENT FEES		5,622.
TOTAL INCLUDED ON SCHEDULE K, LINE 13D		15,982.

SCHEDULE L	OTHER INVESTMENTS	STATEMENT 3
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
3D BIO HOLDINGS INC - CONV PROM NOT		870,000.
IMAGIN MEDICAL CONVERTIBLE PROM NOT		100,000.
PONCE THERAPEUTICS, INC - CONV PROM		100,000.
TOTAL TO SCHEDULE L, LINE 8		1,070,000.

SCHEDULE L	OTHER ASSETS	STATEMENT 4
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
CAPITAL CALL RECEIVABLE		11,000.
PORTFOLIO INTEREST RECEIVABLE		9,376.
TOTAL TO SCHEDULE L, LINE 13		20,376.

FORM 1065

PARTNERS' CAPITAL ACCOUNT SUMMARY

STATEMENT 5

PARTNER NUMBER	BEGINNING CAPITAL	CAPITAL CONTRIBUTED	SCHEDULE M-2 LNS 3, 4 & 7	WITH- DRAWALS	ENDING CAPITAL
1	0.	100,000.	-594.		99,406.
2	0.	1,000,000.	-5,946.		994,054.
3	0.	11,100.	-66.		11,034.
TOTAL	0.	1,111,100.	-6,606.		1,104,494.

Schedule K-1 (Form 1065)

2022

Final K-1 Amended K-1 OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

For calendar year 2022, or tax year

beginning ending

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number 88-3291591

B Partnership's name, address, city, state, and ZIP code RAPHA CAPITAL PE LIFE SCIENCES FUND VI LP 9511 COLLINS AVE #1403 SURFSIDE, FL 33154

C IRS center where partnership filed return: E-FILE

D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.) 11-3246656

F Name, address, city, state, and ZIP code for partner entered in E. See instructions. ARBOR COMMERCIAL MORTGAGE LLC 333 EARLE OVINGTON BLVD UNIONDALE, NY 11553

G General partner or LLC member-manager Limited partner or other LLC member

H1 Domestic partner Foreign partner

H2 If the partner is a disregarded entity (DE), enter the partner's:

TIN Name

I1 What type of entity is this partner? PARTNERSHIP

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here

J Partner's share of profit, loss, and capital:

Table with columns: Beginning, Ending. Rows: Profit, Loss, Capital. Values: 9.0000000%, 9.0000000%

Check if decrease is due to sale or exchange of partnership interest

K Partner's share of liabilities:

Table with columns: Beginning, Ending. Rows: Nonrecourse, Qualified nonrecourse financing, Recourse. Values: \$, 506., \$, 0., \$, 0.

Check this box if Item K includes liability amounts from lower-tier partnerships

L Partner's Capital Account Analysis

Table with columns: Description, Amount. Rows: Beginning capital account, Capital contributed during the year, Current year net income (loss), Other increase (decrease), Withdrawals and distributions, Ending capital account. Values: \$, 100,000., \$, -594., \$, \$, \$, 99,406.

M Did the partner contribute property with a built-in gain (loss)? Yes No

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Table with columns: Description, Amount. Rows: Beginning, Ending. Values: \$, \$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

Table with columns: Description, Amount. Rows: 1 Ordinary business income (loss) 0., 2 Net rental real estate income (loss), 3 Other net rental income (loss), 4a Guaranteed payments for services, 4b Guaranteed payments for capital, 4c Total guaranteed payments, 5 Interest income 844., 6a Ordinary dividends, 6b Qualified dividends, 6c Dividend equivalents, 7 Royalties, 8 Net short-term capital gain (loss), 9a Net long-term capital gain (loss), 9b Collectibles (28%) gain (loss), 9c Unrecaptured section 1250 gain, 10 Net section 1231 gain (loss), 11 Other income (loss), 12 Section 179 deduction, 13 Other deductions L* STMT, 14 Self-employment earnings (loss) 0., 15 Credits, 16 Schedule K-3 is attached if checked, 17 Alternative min tax (AMT) items, 18 Tax-exempt income and nondeductible expenses, 19 Distributions, 20 Other information A 844., B 1,438., 21 Foreign taxes paid or accrued

22 More than one activity for at-risk purposes* 23 More than one activity for passive activity purposes* *See attached statement for additional information.

For IRS Use Only

SCHEDULE K-1 OTHER PORTFOLIO DEDUCTIONS, BOX 13, CODE L

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
FILING FEES		212.
FUND ADMINISTRATION FEES		720.
MANAGEMENT FEES		506.
TOTAL TO SCHEDULE K-1, BOX 13, CODE L		1,438.

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
INTEREST INCOME	844.	
SCHEDULE K-1 INCOME SUBTOTAL		844.
PORTFOLIO DEDUCTIONS	-1,438.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		-1,438.
NET INCOME (LOSS) PER SCHEDULE K-1		-594.

SCHEDULE K-1 SCHEDULE K-3 NOTIFICATION

THE SCHEDULE K-3 HAS NOT BEEN PREPARED FOR YOU. YOU WILL NOT RECEIVE A COPY OF THE SCHEDULE UNLESS YOU REQUEST ONE.

Partner Basis Worksheet

Partner Number: 1	Partner ID Number: 11-3246656
Partner Name: ARBOR COMMERCIAL MORTGAGE LLC	Ownership Percentage: 9.0000%
Partnership Name: RAPHA CAPITAL PE LIFE SCIENCES FUND VI LP	Partnership ID Number: 88-3291591
	Year Ended: DECEMBER 31, 2022

Increases:		
1. Adjusted basis at the end of the prior year (not less than zero)	1.	0.
2. Money and your adjusted basis in property contributed to the partnership less the associated liabilities (not less than zero)	2.	100,000.
3. Partner's share of partnership liabilities (current year Item K, Schedule K-1 and increased share)	3.	506.
a. Less: Liabilities included in line 1 above (prior year Item K)	3a.	
4. Items of income or gain this year including tax-exempt income		
a. Ordinary business income	a.	
b. Net rental real estate income	b.	
c. Other net rental income	c.	
d. Interest income	d.	844.
e. Ordinary dividends	e.	
f. Royalties	f.	
g. Net short-term capital gain	g.	
h. Net long-term capital gain	h.	
i. Net gain under Section 1231	i.	
j. Other income	j.	
k. Tax-exempt income	k.	
l. Other increases:	l.	
Total income and gain (Add 4(a) through 4(l))	4.	844.
5. Gain (if any) recognized this year on contribution of property to partnership (other than gain from transfer of liabilities)	5.	
6. Depletion (other than oil and gas) in excess of basis	6.	
Total increases (Add lines 2 through 6)		101,350.
Decreases:		
7. Withdrawals and distributions during the year	7.	
8. Partner's share of partnership liabilities (current year Item K, Sch K-1 and decreased share)	8.	
a. Less: Liabilities included in line 1 above (prior year Item K)	8a.	
9. Nondeductible expenses	9.	
10. Partnership losses and deductions:		
a. Ordinary business (loss)	a.	
b. Net rental real estate (loss)	b.	
c. Other net rental (loss)	c.	
d. Net short-term capital (loss)	d.	
e. Net long-term capital (loss)	e.	
f. Net loss under Section 1231	f.	
g. Other deductions	g.	1,438.
h. Charitable contributions	h.	
i. Section 179 deduction	i.	
j. Foreign taxes paid or accrued	j.	
k. Other decreases:	k.	
l. Disallowed prior year's losses and deductions	l.	
11. Oil and gas depletion (not to exceed your allocable share of the adjusted basis of the property)	11.	
Total decreases (Add 10(a) through 10(k) and line 11)		1,438.
12. Adjusted Basis of partnership interest (If less than zero, enter zero)	12.	99,912.
Gain on Distributions:		
13. a. Cash distributions	a.	
b. Less: basis before distributions and allocable loss	b.	
c. Gain on distribution	c.	
Carryover:		
14. a. Prior year loss	a.	
b. Add: Losses and deductions this year	b.	1,438.
c. Less: Applied this year	c.	101,350.
d. End of year (not less than 0)	d.	0.

Schedule K-1 (Form 1065)

2022

Final K-1 Amended K-1 OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

For calendar year 2022, or tax year

beginning ending

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number 88-3291591

B Partnership's name, address, city, state, and ZIP code RAPHA CAPITAL PE LIFE SCIENCES FUND VI LP 9511 COLLINS AVE #1403 SURFSIDE, FL 33154

C IRS center where partnership filed return: E-FILE

D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.) 43-2056500

F Name, address, city, state, and ZIP code for partner entered in E. See instructions. MCGUYER INVESTMENTS LTD 314 SHADYWOOD RD HOUSTON, TX 77057

G General partner or LLC member-manager Limited partner or other LLC member

H1 Domestic partner Foreign partner

H2 If the partner is a disregarded entity (DE), enter the partner's:

TIN Name

I1 What type of entity is this partner? PARTNERSHIP

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here

J Partner's share of profit, loss, and capital:

Table with columns: Beginning, Ending. Rows: Profit, Loss, Capital. Values: 90.0010000%, 90.0010000%

Check if decrease is due to sale or exchange of partnership interest

K Partner's share of liabilities:

Table with columns: Beginning, Ending. Rows: Nonrecourse, Qualified nonrecourse financing, Recourse. Values: \$, 5,060., \$, 0., \$, 0.

Check this box if Item K includes liability amounts from lower-tier partnerships

L Partner's Capital Account Analysis

Table with columns: Description, Amount. Rows: Beginning capital account, Capital contributed during the year, Current year net income (loss), Other increase (decrease), Withdrawals and distributions, Ending capital account. Values: \$, 1,000,000., \$, -5,946., \$, \$, \$, 994,054.

M Did the partner contribute property with a built-in gain (loss)? Yes No

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)

Table with columns: Beginning, Ending. Values: \$, \$

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

Table with columns: Description, Amount. Rows: 1 Ordinary business income (loss) 0., 14 Self-employment earnings (loss) 0., 2 Net rental real estate income (loss), 3 Other net rental income (loss), 4a Guaranteed payments for services, 4b Guaranteed payments for capital, 4c Total guaranteed payments, 5 Interest income 8,438., 6a Ordinary dividends, 6b Qualified dividends, 6c Dividend equivalents, 7 Royalties, 8 Net short-term capital gain (loss), 9a Net long-term capital gain (loss), 9b Collectibles (28%) gain (loss), 9c Unrecaptured section 1250 gain, 10 Net section 1231 gain (loss), 11 Other income (loss), 12 Section 179 deduction, 13 Other deductions L* STMT, 14 Self-employment earnings (loss) 0., 15 Credits, 16 Schedule K-3 is attached if checked, 17 Alternative min tax (AMT) items, 18 Tax-exempt income and nondeductible expenses, 19 Distributions, 20 Other information A 8,438., B 14,384., 21 Foreign taxes paid or accrued

22 More than one activity for at-risk purposes* 23 More than one activity for passive activity purposes* *See attached statement for additional information.

For IRS Use Only

SCHEDULE K-1 OTHER PORTFOLIO DEDUCTIONS, BOX 13, CODE L

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
FILING FEES		2,124.
FUND ADMINISTRATION FEES		7,200.
MANAGEMENT FEES		5,060.
TOTAL TO SCHEDULE K-1, BOX 13, CODE L		14,384.

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
INTEREST INCOME	8,438.	
SCHEDULE K-1 INCOME SUBTOTAL		8,438.
PORTFOLIO DEDUCTIONS	-14,384.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		-14,384.
NET INCOME (LOSS) PER SCHEDULE K-1		-5,946.

SCHEDULE K-1 SCHEDULE K-3 NOTIFICATION

THE SCHEDULE K-3 HAS NOT BEEN PREPARED FOR YOU. YOU WILL NOT RECEIVE A COPY OF THE SCHEDULE UNLESS YOU REQUEST ONE.

Partner Basis Worksheet

Partner Number: 2	Partner ID Number: 43-2056500
Partner Name: MCGUYER INVESTMENTS LTD	Ownership Percentage: 90.0010%
Partnership Name: RAPHA CAPITAL PE LIFE SCIENCES FUND VI LP	Partnership ID Number: 88-3291591
	Year Ended: DECEMBER 31, 2022

Increases:	
1. Adjusted basis at the end of the prior year (not less than zero)	1. 0.
2. Money and your adjusted basis in property contributed to the partnership less the associated liabilities (not less than zero)	2. 1,000,000.
3. Partner's share of partnership liabilities (current year Item K, Schedule K-1 and increased share)	3. 5,060.
a. Less: Liabilities included in line 1 above (prior year Item K)	3a.
4. Items of income or gain this year including tax-exempt income	
a. Ordinary business income	a.
b. Net rental real estate income	b.
c. Other net rental income	c.
d. Interest income	d. 8,438.
e. Ordinary dividends	e.
f. Royalties	f.
g. Net short-term capital gain	g.
h. Net long-term capital gain	h.
i. Net gain under Section 1231	i.
j. Other income	j.
k. Tax-exempt income	k.
l. Other increases:	l.
Total income and gain (Add 4(a) through 4(l))	4. 8,438.
5. Gain (if any) recognized this year on contribution of property to partnership (other than gain from transfer of liabilities)	5.
6. Depletion (other than oil and gas) in excess of basis	6.
Total increases (Add lines 2 through 6)	1,013,498.
Decreases:	
7. Withdrawals and distributions during the year	7.
8. Partner's share of partnership liabilities (current year Item K, Sch K-1 and decreased share)	8.
a. Less: Liabilities included in line 1 above (prior year Item K)	8a.
9. Nondeductible expenses	9.
10. Partnership losses and deductions:	
a. Ordinary business (loss)	a.
b. Net rental real estate (loss)	b.
c. Other net rental (loss)	c.
d. Net short-term capital (loss)	d.
e. Net long-term capital (loss)	e.
f. Net loss under Section 1231	f.
g. Other deductions	g. 14,384.
h. Charitable contributions	h.
i. Section 179 deduction	i.
j. Foreign taxes paid or accrued	j.
k. Other decreases:	k.
l. Disallowed prior year's losses and deductions	l.
11. Oil and gas depletion (not to exceed your allocable share of the adjusted basis of the property)	11.
Total decreases (Add 10(a) through 10(k) and line 11)	14,384.
12. Adjusted Basis of partnership interest (If less than zero, enter zero)	12. 999,114.
Gain on Distributions:	
13. a. Cash distributions	a.
b. Less: basis before distributions and allocable loss	b.
c. Gain on distribution	c.
Carryover:	
14. a. Prior year loss	a.
b. Add: Losses and deductions this year	b. 14,384.
c. Less: Applied this year	c. 1,013,498.
d. End of year (not less than 0)	d. 0.

Schedule K-1 (Form 1065)

2022

Final K-1 Amended K-1 OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

For calendar year 2022, or tax year

beginning ending

Partner's Share of Income, Deductions, Credits, etc.

See separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number 88-3291591
B Partnership's name, address, city, state, and ZIP code RAPHA CAPITAL PE LIFE SCIENCES FUND VI LP 9511 COLLINS AVE #1403 SURFSIDE, FL 33154
C IRS center where partnership filed return: E-FILE
D Check if this is a publicly traded partnership (PTP)

Part II Information About the Partner

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.) 90-1186965
F Name, address, city, state, and ZIP code for partner entered in E. See instructions. KEVIN SLAWIN 2009 FAMILY TRUST 9511 COLLINS AVE, #1403 SURFSIDE, FL 33154
G General partner or LLC member-manager Limited partner or other LLC member
H1 Domestic partner Foreign partner
H2 If the partner is a disregarded entity (DE), enter the partner's: TIN 88-3333756 Name RAPHA CAPITAL PE LIFE
I1 What type of entity is this partner? TRUST
I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here

J Partner's share of profit, loss, and capital: Beginning Ending Profit 0.9990000% 0.9990000% Loss 0.9990000% 0.9990000% Capital 0.9990000% 0.9990000%
K Partner's share of liabilities: Beginning Ending Nonrecourse \$ 56. Qualified nonrecourse financing \$ Recourse \$ 0. \$ 0.

L Partner's Capital Account Analysis

Beginning capital account \$ Capital contributed during the year \$ 11,100. Current year net income (loss) \$ -66. Other increase (decrease) (attach explanation) \$ Withdrawals and distributions \$() Ending capital account \$ 11,034.

M Did the partner contribute property with a built-in gain (loss)? Yes No X No If "Yes," attach statement. See instructions.

N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss) Beginning Ending

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

Table with 2 columns: Description and Amount. Rows include: 1 Ordinary business income (loss) 0., 2 Net rental real estate income (loss), 3 Other net rental income (loss), 4a Guaranteed payments for services, 4b Guaranteed payments for capital, 4c Total guaranteed payments, 5 Interest income 94., 6a Ordinary dividends, 6b Qualified dividends, 6c Dividend equivalents, 7 Royalties, 8 Net short-term capital gain (loss), 9a Net long-term capital gain (loss), 9b Collectibles (28%) gain (loss), 9c Unrecaptured section 1250 gain, 10 Net section 1231 gain (loss), 11 Other income (loss), 12 Section 179 deduction, 13 Other deductions L* STMT, 14 Self-employment earnings (loss), 15 Credits, 16 Schedule K-3 is attached if checked, 17 Alternative min tax (AMT) items, 18 Tax-exempt income and nondeductible expenses, 19 Distributions, 20 Other information A 94. B 160., 21 Foreign taxes paid or accrued.

22 More than one activity for at-risk purposes* 23 More than one activity for passive activity purposes* *See attached statement for additional information.

For IRS Use Only

SCHEDULE K-1 OTHER PORTFOLIO DEDUCTIONS, BOX 13, CODE L

DESCRIPTION	PARTNER FILING INSTRUCTIONS	AMOUNT
FILING FEES		24.
FUND ADMINISTRATION FEES		80.
MANAGEMENT FEES		56.
TOTAL TO SCHEDULE K-1, BOX 13, CODE L		160.

SCHEDULE K-1 CURRENT YEAR NET INCOME (LOSS) AND OTHER INCREASES(DECREASES)

DESCRIPTION	AMOUNT	TOTALS
INTEREST INCOME	94.	
SCHEDULE K-1 INCOME SUBTOTAL		94.
PORTFOLIO DEDUCTIONS	-160.	
SCHEDULE K-1 DEDUCTIONS SUBTOTAL		-160.
NET INCOME (LOSS) PER SCHEDULE K-1		-66.

SCHEDULE K-1 SCHEDULE K-3 NOTIFICATION

THE SCHEDULE K-3 HAS NOT BEEN PREPARED FOR YOU. YOU WILL NOT RECEIVE A COPY OF THE SCHEDULE UNLESS YOU REQUEST ONE.

Partner Basis Worksheet

Partner Number: 3	Partner ID Number: 90-1186965
Partner Name: KEVIN SLAWIN 2009 FAMILY TRUST	Ownership Percentage: 0.9990%
Partnership Name: RAPHA CAPITAL PE LIFE SCIENCES FUND VI LP	Partnership ID Number: 88-3291591
	Year Ended: DECEMBER 31, 2022

Increases:	
1. Adjusted basis at the end of the prior year (not less than zero)	1. 0.
2. Money and your adjusted basis in property contributed to the partnership less the associated liabilities (not less than zero)	2. 11,100.
3. Partner's share of partnership liabilities (current year Item K, Schedule K-1 and increased share)	3. 56.
a. Less: Liabilities included in line 1 above (prior year Item K)	3a.
4. Items of income or gain this year including tax-exempt income	
a. Ordinary business income	a.
b. Net rental real estate income	b.
c. Other net rental income	c.
d. Interest income	d. 94.
e. Ordinary dividends	e.
f. Royalties	f.
g. Net short-term capital gain	g.
h. Net long-term capital gain	h.
i. Net gain under Section 1231	i.
j. Other income	j.
k. Tax-exempt income	k.
l. Other increases:	l.
Total income and gain (Add 4(a) through 4(l))	4. 94.
5. Gain (if any) recognized this year on contribution of property to partnership (other than gain from transfer of liabilities)	5.
6. Depletion (other than oil and gas) in excess of basis	6.
Total increases (Add lines 2 through 6)	11,250.
Decreases:	
7. Withdrawals and distributions during the year	7.
8. Partner's share of partnership liabilities (current year Item K, Sch K-1 and decreased share)	8.
a. Less: Liabilities included in line 1 above (prior year Item K)	8a.
9. Nondeductible expenses	9.
10. Partnership losses and deductions:	
a. Ordinary business (loss)	a.
b. Net rental real estate (loss)	b.
c. Other net rental (loss)	c.
d. Net short-term capital (loss)	d.
e. Net long-term capital (loss)	e.
f. Net loss under Section 1231	f.
g. Other deductions	g. 160.
h. Charitable contributions	h.
i. Section 179 deduction	i.
j. Foreign taxes paid or accrued	j.
k. Other decreases:	k.
l. Disallowed prior year's losses and deductions	l.
11. Oil and gas depletion (not to exceed your allocable share of the adjusted basis of the property)	11.
Total decreases (Add 10(a) through 10(k) and line 11)	160.
12. Adjusted Basis of partnership interest (If less than zero, enter zero)	12. 11,090.
Gain on Distributions:	
13. a. Cash distributions	a.
b. Less: basis before distributions and allocable loss	b.
c. Gain on distribution	c.
Carryover:	
14. a. Prior year loss	a.
b. Add: Losses and deductions this year	b. 160.
c. Less: Applied this year	c. 11,250.
d. End of year (not less than 0)	d. 0.