

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

Complete all entries in accordance with the instructions to the Form 5500.

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

- A This return/report is for: a multiemployer plan, a multiple-employer plan, a single-employer plan, a DFE (specify) E, B This return/report is: the first return/report, the final return/report, an amended return/report, a short plan year return/report, C If the plan is a collectively-bargained plan, check here, D Check box if filing under: Form 5558, automatic extension, the DFVC program, special extension, E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here

Part II Basic Plan Information—enter all requested information

1a Name of plan ADAMS STREET 2019 NON-US FUND LP, 1b Three-digit plan number (PN) 001, 1c Effective date of plan, 2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) ADAMS STREET PARTNERS, LLC ONE NORTH WACKER DRIVE STE 2700 CHICAGO, IL 60606-2823, 2b Employer Identification Number (EIN) 83-2227716, 2c Plan Sponsor's telephone number 312-553-7890, 2d Business code (see instructions) 000000

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

Table with 4 columns: SIGN HERE, Signature, Date, and Name. Rows include: Filed with authorized/valid electronic signature, Signature of plan administrator, Signature of employer/plan sponsor, and Signature of DFE.

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2024) v. 240311

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>																				
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN																				
5 Total number of participants at the beginning of the plan year	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">5</td> <td style="width:90%; text-align: right;">0</td> </tr> </table>	5	0																		
5	0																				
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">6a(1)</td> <td style="width:90%;"></td> </tr> <tr> <td style="text-align: center;">6a(2)</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: center;">6b</td> <td></td> </tr> <tr> <td style="text-align: center;">6c</td> <td></td> </tr> <tr> <td style="text-align: center;">6d</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: center;">6e</td> <td></td> </tr> <tr> <td style="text-align: center;">6f</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: center;">6g(1)</td> <td></td> </tr> <tr> <td style="text-align: center;">6g(2)</td> <td></td> </tr> <tr> <td style="text-align: center;">6h</td> <td></td> </tr> </table>	6a(1)		6a(2)	0	6b		6c		6d	0	6e		6f	0	6g(1)		6g(2)		6h	
6a(1)																					
6a(2)	0																				
6b																					
6c																					
6d	0																				
6e																					
6f	0																				
6g(1)																					
6g(2)																					
6h																					
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">7</td> <td style="width:90%;"></td> </tr> </table>	7																			
7																					

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules (1) <input type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____ (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information – Small Plan) (3) <input type="checkbox"/> A (Insurance Information) – Number Attached _____ (4) <input checked="" type="checkbox"/> C (Service Provider Information) (5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) Yes No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) Yes No

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan ADAMS STREET 2019 NON-US FUND LP	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 ADAMS STREET PARTNERS, LLC	D Employer Identification Number (EIN) 83-2227716	

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... Yes No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

ADAMS STREET PARTNERS LP

36-4395128

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 28	NONE	1890008	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

JP MORGAN CHASE BANK

13-4994650

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
18	NONE	14758	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

KPMG LLP

13-5565207

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	184194	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

MAPLES AND CALDER

P.O. BOX 309 UGLAND HOUSE
GRAND CAYMAN KY1-1104 KY

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	24847	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

APEX ESG RATINGS LTD

VALLIS BUILDING, 4TH FLOOR, 58 PAR-
HAMILTON, BERMUDA HM11 BM

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
99	NONE	5829	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

INCLOUD, LLC

46-5342154

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
99	NONE	8233	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

T. ROWE PRICE ASSOCIATES, INC.

52-0556948

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
72	NONE	9935	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>ADAMS STREET 2019 NON-US FUND LP</u>	B Three-digit plan number (PN)	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>ADAMS STREET PARTNERS, LLC</u>	D Employer Identification Number (EIN) <u>83-2227716</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name	ADAMS STREET 2019 GLOBAL FUND LP	
b Name of plan sponsor	ADAMS STREET PARTNERS, LLC	c EIN-PN 83-2207227-001

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan ADAMS STREET 2019 NON-US FUND LP	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 ADAMS STREET PARTNERS, LLC	D Employer Identification Number (EIN) 83-2227716

Part I	Asset and Liability Statement
---------------	--------------------------------------

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

	(a) Beginning of Year	(b) End of Year
Assets		
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	39365 60241
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	3705387 3776868
(5) Partnership/joint venture interests	1c(5)	266377401 251032471
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	51206 5546365
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	
(15) Other	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	270173359	260415945
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	2963655	166964
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	2963655	166964
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	267209704	260248981

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	27169	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	25124020	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	11107043	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-19002894	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	
c Other income	2c	592226
d Total income. Add all income amounts in column (b) and enter total	2d	-4366522

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	
(2) To insurance carriers for the provision of benefits	2e(2)	
(3) Other	2e(3)	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)	
f Corrective distributions (see instructions)	2f	
g Certain deemed distributions of participant loans (see instructions)	2g	
h Interest expense	2h	199481
i Administrative expenses:		
(1) Salaries and allowances	2i(1)	
(2) Contract administrator fees	2i(2)	
(3) Recordkeeping fees	2i(3)	
(4) IQPA audit fees	2i(4)	184194
(5) Investment advisory and investment management fees	2i(5)	1890008
(6) Bank or trust company trustee/custodial fees	2i(6)	14758
(7) Actuarial fees	2i(7)	
(8) Legal fees	2i(8)	29437
(9) Valuation/appraisal fees	2i(9)	
(10) Other trustee fees and expenses	2i(10)	
(11) Other expenses	2i(11)	37323
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)	2155720
j Total expenses. Add all expense amounts in column (b) and enter total	2j	2355201

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	-6721723
l Transfers of assets:		
(1) To this plan	2l(1)	
(2) From this plan	2l(2)	239000

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) Unmodified (2) Qualified (3) Disclaimer (4) Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) DOL Regulation 2520.103-8 (2) DOL Regulation 2520.103-12(d) (3) neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **KPMG LLP**

(2) EIN: **13-5565207**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) This form is filed for a CCT, PSA, DCG or MTIA. (2) It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)			
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
l Has the plan failed to provide any benefit when due under the plan?			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? Yes No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

CONFIDENTIAL

ADAMS STREET 2019 NON-US FUND LP

Financial Statements

December 31, 2024

(With Independent Auditors' Report Thereon)



KPMG LLP
Aon Center
Suite 5500
200 E. Randolph Street
Chicago, IL 60601-6436

Independent Auditors' Report

The Partners
Adams Street 2019 Non-US Fund LP:

Opinion

We have audited the financial statements of Adams Street 2019 Non-US Fund LP (the Fund), which comprise the statement of financial condition, including the schedule of investments, as of December 31, 2024, and the related statements of operations and cash flows for the year then ended, the statements of changes in partners' equity for each of the years in the two-year period then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Fund as of December 31, 2024, and the results of its operations and its cash flows for the year then ended, and the changes in its partners' equity for each of the years in the two-year period then ended, in accordance with U.S. generally accepted accounting principles.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Fund and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with U.S. generally accepted accounting principles, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Fund's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.



In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Fund's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Fund's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

KPMG LLP

Chicago, Illinois
April 25, 2025

Adams Street 2019 Non-US Fund LP
Statement of Financial Condition
December 31, 2024

Assets

Investments, at cost	\$208,495,666.61
Unrealized appreciation/depreciation on investments	46,313,672.65
	254,809,339.26
Investments, at fair value	254,809,339.26
Cash and cash equivalents	5,546,364.52
Other receivables	60,241.16
	60,241.16
Total assets	\$260,415,944.94

Liabilities and Partners' Equity

Liabilities:

Accrued audit and tax compliance fees	\$156,764.53
Accrued stock liquidation fees	9,935.45
Other payables	264.36
	264.36
Total liabilities	166,964.34

Partners' equity, composed of:

Cumulative equity contributed	211,528,870.00
Cumulative distributions	(28,354,045.00)
Cumulative earnings/deficit	77,074,155.60
	77,074,155.60
Total partners' equity	260,248,980.60

Commitments (see notes)

Total liabilities and partners' equity	\$260,415,944.94
--	------------------

The accompanying notes are an integral part of these financial statements.

**Adams Street 2019 Non-US Fund LP
Schedule of Investments
December 31, 2024**

Investments	Investment Purpose	Geography	Position (if applicable)	Quantity (if applicable)	Amounts in USD	
					Cost	Fair Value
Primary partnerships (62%)						
Advent International GPE IX	Buyouts	Western Europe			12,238,643.00	17,126,776.00
Aleph III	Venture Capital	Israel			7,960,035.92	8,443,918.00
Astorg VIII *	Buyouts	Western Europe			4,508,456.99	4,627,491.07
Centurium Capital Partners II	Buyouts	Asia			3,832,594.60	3,005,301.00
DBAG Fund VIII A *	Buyouts	Western Europe			4,989,059.03	5,147,154.67
DBAG Fund VIII B *	Buyouts	Western Europe			790,800.63	1,183,569.25
Gaorong Partners Fund V, L.P.	Venture Capital	Asia			11,553,668.27	13,358,682.00
Headline US VI, L.P. (4)	Venture Capital	United States			484,429.74	633,644.00
Hg Mercury 3 A *	Buyouts	Western Europe			4,592,518.25	7,300,317.46
Index Ventures Growth V (Jersey)	Venture Capital	Western Europe			12,705,070.95	15,533,232.00
MED Platform I SLP - Compartment 1 *	Buyouts	Western Europe			2,404,275.69	3,659,672.38
MED Platform I SLP - Compartment 2 *	Buyouts	Western Europe			1,945,799.58	3,844,764.90
Medicxi III *	Venture Capital	Western Europe			5,614,923.80	5,201,970.94
Nordic Capital X Beta LP *	Buyouts	Western Europe			8,238,180.65	11,493,804.59
Oakley Capital IV-B SCSp *	Buyouts	Western Europe			7,000,500.05	9,837,213.76
Project Grand First (1)	Buyouts	Asia			5,757,831.44	5,362,500.00
Shunwei China Internet Fund V LP	Venture Capital	Asia			2,028,725.00	2,080,167.00
Shunwei China Internet Opportunity Fund IV LP	Venture Capital	Asia			1,606,415.00	1,721,453.00
Sunrise Capital IV	Buyouts	Asia			8,921,578.00	6,036,162.00
SWC Global Fund LP	Venture Capital	Asia			811,421.00	776,769.00
TLV Partners Opportunity Fund	Venture Capital	Israel			7,335,000.00	9,161,099.00
VIP IV *	Buyouts	Western Europe			11,050,690.01	13,237,465.43
Vitalbridge Fund II	Venture Capital	Asia			5,570,954.65	5,741,989.00
WestCap Strategic Operator Fund II LP (6)	Venture Capital	United States			324,454.00	380,299.00
Zhen Fund Partners VI	Venture Capital	Asia			5,496,508.00	5,503,527.00
Primary partnerships subtotal					137,762,534.25	160,398,942.45
Secondary partnerships (25%)						
ABRY Partners VII	Buyouts	United States			140,791.98	113,687.00
ABRY Partners VIII	Buyouts	United States			392,583.28	260,725.00
ABRY Senior Equity IV	Debt/Credit	United States			80,924.87	62,365.00
ABRY Senior Equity V	Debt/Credit	United States			566,928.19	784,116.00
Accel-KKR Capital Partners CV III	Buyouts	United States			2,761,115.27	7,042,432.00
Accel-KKR Capital Partners CV IV LP	Buyouts	United States			1,677,187.08	1,962,224.00
Accel-KKR Capital Partners CV IV Strategic LP	Buyouts	United States			190,288.00	188,179.00
Altor Fund II (2) *	Buyouts	Western Europe			20,995.86	48,766.87
Altor Fund III (2) *	Buyouts	Western Europe			317,926.41	340,950.80
Altor Fund IV (2) *	Buyouts	Western Europe			679,432.44	538,906.30
Astorg IQ-EQ Fund *	Buyouts	Western Europe			732,516.02	1,614,832.22
Bain Capital Europe Fund III (2) *	Buyouts	Western Europe			133,668.32	38,302.11

**Adams Street 2019 Non-US Fund LP
Schedule of Investments
December 31, 2024**

Investments	Investment Purpose	Geography	Position (if applicable)	Quantity (if applicable)	Amounts in USD	
					Cost	Fair Value
Bain Capital Fund X (2)	Buyouts	United States			218,497.51	136,090.00
Berkshire Fund IX, L.P. (2)	Buyouts	United States			1,615,443.25	2,340,151.00
Berkshire Fund VI, Limited Partnership (2)	Buyouts	United States			75,677.71	62,249.00
Berkshire Fund VII, L.P. (2)	Buyouts	United States			27,676.91	59,138.00
Berkshire Fund VIII, L.P. (2)	Buyouts	United States			2,755,477.41	1,574,679.00
Berkshire Fund VIII-A, L.P.	Buyouts	United States			462,251.03	286,984.00
BV eVenture Fund II (4)	Venture Capital	United States			450,743.51	223,788.00
Charlesbank Equity Fund IX	Buyouts	United States			521,460.82	761,561.00
Charlesbank Equity Fund VIII	Buyouts	United States			513,235.96	367,348.00
CVC Capital Partners VI *	Buyouts	Western Europe			335,743.50	309,447.78
Eurazeo Capital IV B SCSp *	Buyouts	Western Europe			2,105,229.73	2,364,662.62
Eurazeo Capital IV D SCSp *	Buyouts	Western Europe			1,061,786.82	562,573.69
Eurazeo Growth Fund III SLP *	Venture Capital	Western Europe			662,876.44	549,868.10
Eurazeo Growth Secondary Fund SCSp *	Venture Capital	Western Europe			2,275,794.52	2,639,577.52
eVentures Fonds 2 Gmbh & Co. KG (4) *	Venture Capital	Western Europe			418,384.74	481,285.90
FTV IV (5)	Buyouts	United States			0.00	1,390,597.00
FTV V (5)	Buyouts	United States			1,202,656.97	5,828,326.00
FTVentures III (5)	Buyouts	United States			636,120.38	932,022.00
G Square CV *	Buyouts	Western Europe			2,987,522.17	2,942,238.64
HPE Continuation Fund I CV (3) *	Venture Capital	Western Europe			1,387,557.85	1,478,751.99
HPE PPRO Invest II BV (3) *	Venture Capital	Western Europe			48,817.30	52,954.43
Icon Partners III	Buyouts	United States			1,238,577.18	1,662.00
Icon Software Partners	Buyouts	United States			25,969.42	1,402,637.00
Lion/Simba Investors *	Buyouts	Western Europe			268,880.30	573,639.04
Madison Dearborn Capital Partners VI	Buyouts	United States			134,812.86	813.00
Marlin Credit Opportunities L.P	Debt/Credit	United States			165,998.00	155,338.00
Marlin Equity III (2)	Buyouts	United States			58,686.93	12,100.00
Marlin Equity IV (2)	Buyouts	United States			516,359.27	458,432.00
Marlin Heritage (2)	Buyouts	United States			174,794.58	84,861.00
Marlin Heritage Europe (2) *	Buyouts	United States			192,861.43	307,632.55
Oak Hill Capital Partners V LP (MetroNet COI)	Buyouts	United States			1,045,768.69	1,972,266.00
Pegasus WSJLL Fund LP	Buyouts	United States			1,775,884.27	2,065,548.00
Permira IV Feeder LP	Buyouts	Western Europe			2,518,223.42	5,520,883.00
Providence Equity Partners VI (2)	Buyouts	United States			90,477.16	3,599.00
Rho Ventures VI (5)	Venture Capital	United States			1,479,361.82	836,834.00
Sagamore China Partners III LP (7)	Venture Capital	Asia			943,403.41	1,180,766.00
Sagamore China Partners IV LP (7)	Venture Capital	Asia			1,141,064.09	1,326,307.00
Serent Capital Fund I	Buyouts	United States			242,229.02	394,479.00
Shunwei China Internet Fund III	Venture Capital	Asia			144,051.38	481,873.00
ShunWei China Internet Opportunity II	Venture Capital	Asia			192,659.71	638,307.00
STG IV (2)	Buyouts	United States			599,344.26	164,800.00

**Adams Street 2019 Non-US Fund LP
Schedule of Investments
December 31, 2024**

					<u>Amounts in USD</u>	
Investments	Investment Purpose	Geography	Position (if applicable)	Quantity (if applicable)	Cost	Fair Value
University Ventures Fund II	Venture Capital	United States			1,247,510.13	1,722,195.00
University Ventures SPV-1, L.P.	Venture Capital	United States			7,781.00	584,711.00
Warburg Pincus Private Equity X (5)	Buyouts	United States			477,536.64	132,024.00
Warburg Pincus Private Equity XI (5)	Buyouts	United States			479,729.88	473,807.00
Warburg Pincus Private Equity XII (5)	Buyouts	United States			1,543,516.19	2,079,922.00
Waterland Strategic Opportunities Fund I *	Buyouts	Western Europe			960,807.33	2,398,218.00
WestCap Strategic Operator Fund LP (6)	Venture Capital	United States			1,336,757.21	1,065,395.00
WestCap STUB LLC (6)	Venture Capital	United States			216,389.42	222,188.00
WestCap VG LLC (6)	Venture Capital	United States			24,752.96	24,934.00
Secondary partnerships subtotal					46,701,500.21	64,625,950.56
Partnerships subtotal					184,464,034.46	225,024,893.01
Publicly-held unsold stock distributions (0%)						
Paymentus Corporation	Buyouts	United States		13,350	497,033.50	436,144.50
Publicly-held unsold stock distributions subtotal					497,033.50	436,144.50
Privately-held co-investments (11%)						
58.com (8)	Buyouts	Asia	LP Interest		1,323,868.37	1,424,761.81
Aidite Technology Co., Ltd. (9)	Growth	Asia	Ordinary Shares	448,893	470,099.75	1,178,589.00
Expereo International B.V. (10) *	Buyouts	Western Europe	Depository Receipts	1,261,140	1,534,691.81	1,332,004.04
Gaosi Education Group (11)	Buyouts	Asia	LP Interest		1,031,159.43	256,662.00
Independent Vetcare Limited (12) *	Buyouts	Western Europe	LP Interest		309,847.05	2,116,022.51
Inherent (fka Adista) (13) *	Buyouts	Western Europe	LP Interest		1,292,694.35	1,774,723.98
Jio Platforms Limited (14)	Growth	Asia	LLC Interest		1,460,864.36	2,121,263.46
Leqee Group Limited II (15)	Growth	Asia	LP Interest		1,539,815.13	1,258,555.61
LGC (16) *	Buyouts	Western Europe	LLC Interest		1,059,372.92	1,791,201.81
MessageBird B.V. (17)	Growth	Western Europe	LP Interest		1,549,397.74	1,527,443.66
MYOB Group Limited (18)	Growth	Australasia	LP Interest		1,107,231.23	1,469,286.00
Norstella (fka Evaluate Pharma) (19) *	Buyouts	Western Europe	LP Interest		236,546.24	728,824.16
O-Net Technologies (Group) Limited (20)	Buyouts	Asia	LP Interest		1,307,746.43	1,799,580.00
Partnered Health (fka Fullerton Health Australia) (21) *	Buyouts	Australasia	Ordinary Units		970,896.04	830,129.98
Reliance Retail Limited (22)	Buyouts	Asia	LP Interest		1,554,072.68	2,503,685.54
Shandong Taishan Beer Co Ltd (23)	Growth	Asia	LP Interest		2,212,196.05	2,452,088.00
Symeres (24) *	Buyouts	Western Europe	LP Interest		1,442,533.53	1,251,203.46
Visma (25)	Buyouts	Western Europe	LP Interest		998,493.30	2,136,962.67
Windstar Medical GmbH (26) *	Buyouts	Western Europe	LP Interest		1,322,446.87	594,152.30
Zhejiang New Century Hotel Management Co., Ltd. (27)	Buyouts	Asia	LP Interest		810,625.38	801,161.75
Privately-held co-investments subtotal					23,534,598.65	29,348,301.75
Total investments (98%)					208,495,666.61	254,809,339.26

**Adams Street 2019 Non-US Fund LP
Schedule of Investments
December 31, 2024**

<u>Investment Purpose allocation</u>	<u>Amounts in USD</u>		
	<u>Cost</u>	<u>Fair Value</u>	<u>% of Investments, at Fair Value</u>
Buyouts	125,872,699.47	161,753,808.65	64%
Debt/Credit	813,851.06	1,001,819.00	0%
Growth	8,339,604.26	10,007,225.73	4%
Venture Capital	73,469,511.82	82,046,485.88	32%
	208,495,666.61	254,809,339.26	100%

<u>Geographic allocation</u>	<u>Amounts in USD</u>		
	<u>Cost</u>	<u>Fair Value</u>	<u>% of Investments, at Fair Value</u>
Asia	59,711,322.12	61,010,150.17	24%
Australasia	2,078,127.27	2,299,415.98	1%
Israel	15,295,035.92	17,605,017.00	7%
United States	28,670,075.69	39,992,926.05	16%
Western Europe	102,741,105.61	133,901,830.05	52%
	208,495,666.61	254,809,339.26	100%

* Investment interest denominated in foreign currency; cost includes the impact of exchange rate differences from actual draws and distributions.

- (1) Invests through Project Grand First Facilitation Fund
- (2) Invests through ASP Falcon Facilitation LLC
- (3) Invests through ASP Herengracht Facilitation Ltd
- (4) Invests through ASP Omni Facilitation LLC
- (5) Invests through ASP Recipe Facilitation LLC
- (6) Invests through ASP Sec Fac 1 LP
- (7) Invests through ASP Stitch Facilitation LP
- (8) Invests through Adams Street Ocean Co-Inv. Aggregator LLC and/or Ocean Alliance III, L.P.
- (9) Invests through ASP Hero SPV Limited
- (10) Invests through Stichting Administratiekantoor Ristretto Co-Investment
- (11) Invests through LVC Think Tank LP
- (12) Invests through IVC New TopHolding S.A. and/or EQT VII Co-Investment (A) SCSp
- (13) Invests through Adams Street Apos Co-Inv. Aggregator LP, which invests through Keensight Adista Co-Invest SLP
- (14) Invests through Adams Street Redwood Co-Inv. Aggregator LLC, which invests through SLP Redwood Co-Invest, L.P.
- (15) Invests through Adams Street Lollipop II Co-Inv. Aggregator LLC and/or CMC Lollipop II, L.P.
- (16) Invests through Adams Street LGC VII Co-Inv. Aggregator LLC
- (17) Invests through EGF III – Co-investment Fund – Birds Nest Compartment I
- (18) Invests through KKR Count Co-Invest L.P.
- (19) Invests through Hg Equator Co-Invest LP
- (20) Invests through LVC Prime LP
- (21) Invests through Quadrant Private Equity Figtree Co-investment Trust
- (22) Invests through Adams Street Rainbow Co-Inv. Aggregator LLC, which invests through SLP Rainbow Co-Invest, L.P.
- (23) Invests through CMC Tarzan, L.P.
- (24) Invests through Adams Street Synthesis Co-Inv. Aggregator LP, which invests through Keensight Symeres Co-Invest SLP
- (25) Invests through Adams Street Vardos Co-Inv. Aggregator LLC and/or Hg Vardos Co-Invest L.P.
- (26) Invests through Adams Street Walther Co-Inv. Aggregator LLC and/or Oakley Capital IV Co-Investment (B) SCSp
- (27) Invests through Adams Street Ocean AK Co-Inv. Aggregator LP, which invests through Alliance Kaiyuan L.P.

The accompanying notes are an integral part of these financial statements.

Adams Street 2019 Non-US Fund LP
Statement of Operations
Year Ended December 31, 2024

Investment income:	
Portfolio income	\$592,226.40
Interest on cash and cash equivalents	27,169.27
Total investment income	619,395.67
Expenses:	
Management fees	1,890,008.00
Audit and tax compliance fees	184,193.75
Custody fees	14,758.33
Stock liquidation fees	9,935.45
Tax expense	7.32
Legal fees	29,436.58
Insurance expense	9,704.64
Professional fees	16,186.66
Interest expense	199,480.67
Other expenses	1,491.16
Total expenses	2,355,202.56
Net investment income/loss	(1,735,806.89)
Realized and unrealized gains and losses on investments:	
Realized gains/losses on investments	14,016,977.31
Change in unrealized appreciation/depreciation on investments	(19,002,893.76)
Net realized and unrealized gain/loss on investments	(4,985,916.45)
Net increase/decrease in equity from operations	(\$6,721,723.34)

The accompanying notes are an integral part of these financial statements.

Adams Street 2019 Non-US Fund LP
Statement of Cash Flows
Year Ended December 31, 2024

Net increase/decrease in equity from operations	(\$6,721,723.34)
Adjustments to reconcile net increase/decrease in equity from operations	
to net cash provided by/used in operating activities:	
Net realized gain/loss on investments	(14,016,977.31)
Net change in unrealized appreciation/depreciation on investments	19,002,893.76
Net proceeds received from investment transactions	25,124,019.99
Net investments purchased/returns of draw on investments	(14,836,487.05)
Change in other receivables	(20,875.81)
Change in accrued audit and tax compliance fees	19,033.98
Change in accrued interest expense	(25,174.06)
Change in accrued stock liquidation fees	9,429.00
Change in other payables	264.36
Total adjustments	15,256,126.86
Net cash provided by/used in operating activities	8,534,403.52
Cash flows provided by/used in financing activities:	
Proceeds from line of credit	8,889,328.66
Repayment of line of credit	(11,689,572.50)
Distributions paid	(239,000.00)
Net cash provided by/used in financing activities	(3,039,243.84)
Net increase/decrease in cash and cash equivalents	5,495,159.68
Cash and cash equivalents at beginning of year	51,204.84
Cash and cash equivalents at end of year	\$5,546,364.52
Supplemental cash flow disclosures:	
Income taxes paid	\$7.32
Interest paid	\$224,654.73

The accompanying notes are an integral part of these financial statements.

Adams Street 2019 Non-US Fund LP
Statements of Changes in Partners' Equity
Years Ended December 31, 2024 and 2023

	General Partner	Special Limited Partner	Limited Partners	Total
Partners' equity at December 31, 2022	\$4,703,615.96	\$1,058,193.54	\$215,969,241.69	\$221,731,051.19
Net investment income/loss, excluding management fees and incentive allocation	(1,255.97)	(3,663.14)	(777,421.98)	(782,341.09)
Management fees	-	-	(1,890,008.00)	(1,890,008.00)
Incentive allocation	276,484.00	-	(276,484.00)	-
Net realized gain/loss on investments	4,569.84	13,328.78	2,828,807.81	2,846,706.43
Net change in unrealized appreciation/depreciation on investments	13,087.57	38,172.14	8,101,397.70	8,152,657.41
Equity contributed	59,640.00	173,950.00	36,918,048.00	37,151,638.00
Partners' equity at December 31, 2023	5,056,141.40	1,279,981.32	260,873,581.22	267,209,703.94
Net investment income/loss, excluding management fees and incentive allocation	247.52	721.94	153,231.65	154,201.11
Management fees	-	-	(1,890,008.00)	(1,890,008.00)
Incentive allocation	163,794.00	-	(163,794.00)	-
Net realized gain/loss on investments	22,501.63	65,629.76	13,928,845.92	14,016,977.31
Net change in unrealized appreciation/depreciation on investments	(30,505.65)	(88,974.52)	(18,883,413.59)	(19,002,893.76)
Distributions paid	(239,000.00)	-	-	(239,000.00)
Partners' equity at December 31, 2024	\$4,973,178.90	\$1,257,358.50	\$254,018,443.20	\$260,248,980.60

The accompanying notes are an integral part of these financial statements.

Adams Street 2019 Non-US Fund LP

Notes to Financial Statements

December 31, 2024

General Information

Adams Street 2019 Non-US Fund LP (the Fund), a Delaware limited partnership, was organized on October 10, 2018, and began operations on February 7, 2019 (commencement of investment operations). The General Partner of the Fund is ASP Carry Partners 2019 LP (General Partner). The Fund and General Partner are managed and advised by Adams Street Partners, LLC (Advisor). The Advisor is registered with the US Securities and Exchange Commission as a registered investment advisor. The Fund's operating agreement (Fund Agreement) states that the Fund shall continue until December 20, 2030, subject to extension for up to three successive one-year periods at the sole discretion of the General Partner.

ASP Partners 2019 LP (Special Limited Partner) is an employee investment vehicle that is not allocated management fees or incentive amounts. The General Partner is not allocated management fees and receives an allocation of 100.00% of the incentive amount.

The Fund was formed for the purpose of investing in private markets limited partnerships or similar pooled investment vehicles (primary and secondary investments or collectively partnership investments) and privately-held portfolio companies (co-investments). Primary investments are investments in an original issuance of a private markets fund. Secondary investments are purchased from unaffiliated limited partners. It is expected that the liquidation of the limited partnership interests will generally coincide with the term of the Fund. Primary and secondary investments are generally illiquid and cannot be redeemed. A co-investment is generally a minority investment alongside a financial investor, which sources and structures the investment. The investment is typically made through an intermediary vehicle controlled by the sponsor, and therefore, the Fund does not have control of the disposition of the underlying asset.

Significant Accounting Policies

Basis of Presentation

The financial statements have been prepared in conformity with U.S. generally accepted accounting principles (GAAP). The Fund is an investment company under the criteria established within Accounting Standards Codification (ASC) Topic 946 *Financial Services – Investment Companies* and applies the specialized accounting and reporting guidance included therein.

Use of Estimates

The preparation of financial statements in accordance with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of increases and decreases in partners' equity from operations during the reporting period. Actual results could differ from those estimates.

Adams Street 2019 Non-US Fund LP

Notes to Financial Statements

December 31, 2024

Cash and Cash Equivalents

Cash represents demand deposits held at financial institutions. Cash and cash equivalents are held at major financial institutions and are subject to credit risk to the extent those balances exceed applicable Federal Deposit Insurance Corporation (FDIC) or Securities Investor Protection Corporation (SIPC) limitations. The Fund records its holdings in daily valued money market mutual fund investments as cash equivalents as these investments are held for meeting short-term liquidity requirements rather than for investment purposes. The carrying amount included in the Statement of Financial Condition for cash and cash equivalents approximates the fair value.

Investment Transactions and Income

Interest income is recognized on an accrual basis. Investment transactions are accounted for on the trade date.

Distributions from partnerships and similar vehicles are recorded as portfolio income or realized gains/losses in accordance with information provided by the underlying manager at the time of the transaction. Reclassifications of prior investment transactions may be required based on subsequent information received from the underlying manager. These reclassifications may impact current year purchases, proceeds and realized gains and losses on investments. Cost is equal to total drawn or paid in the Fund's currency less any return of cost distributed by these investments. Any cost remaining at the time the investment is liquidated is recorded as a realized loss. For other investments, realized gains and losses and investment income on investment transactions are determined using cost calculated on a specific identification basis.

For investments in partnerships and similar vehicles denominated in foreign currencies, contributions are translated into the Fund's currency at the exchange rate at the time of the contribution. As distributions occur, the cost in the Fund's currency is reduced at the exchange rate at the time of the distribution.

Investment Valuation

The Fund records its investments at fair value in accordance with GAAP. Fair value is the price that would be received upon the sale of an investment in an orderly transaction between market participants at the measurement date.

The investments fall into one of the following four categories within the fair value hierarchy:

- Level 1 - inputs reflect unadjusted quoted prices in active markets for identical assets or liabilities that the Fund has the ability to access at the measurement date.

Adams Street 2019 Non-US Fund LP

Notes to Financial Statements

December 31, 2024

Level 1 investments held by the Fund typically consist of public stock positions distributed from partnership investments or held as a result of an initial public offering of a co-investment. Management does not adjust the quoted price for such instruments, even in situations where the Fund holds a large position and a sale could reasonably impact the quoted price.

- Level 2 - inputs include quoted prices for similar assets and liabilities in active markets, and inputs that are observable for the asset or liability other than quoted prices, either directly or indirectly, including inputs in markets that are not considered to be active.

Level 2 investments held by the Fund may consist of public stock positions where the valuation is adjusted to reflect illiquidity and/or non-transferability.

- Level 3 - inputs to the valuation methodology are unobservable and significant to the fair value measurement.

Level 3 investments held by the Fund typically consist of other investments that are not measured at net asset value. When observable prices are not available management uses valuation techniques for which sufficient and reliable data is available. The valuation of nonmarketable privately-held investments requires significant judgment by management due to the absence of quoted market values, inherent lack of liquidity, changes in market conditions and the long-term nature of such assets.

- Investments measured at net asset value – the input is the practical expedient in the FASB's fair value measurement guidance.

Generally, the fair values of partnership investments and similar vehicles are based on the capital account balances reported by the underlying vehicles subject to management review and adjustment. These capital account balances reflect the fair value of the underlying vehicles' investments.

Inputs are used in applying the various valuation techniques and broadly refer to the assumptions that market participants use to make valuation decisions, including assumptions about risk. An investment's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. However, the determination of what constitutes "observable" requires significant judgment by management. Management considers observable data to be that market data which is readily available, regularly distributed or updated, reliable and verifiable, not proprietary and provided by multiple, independent sources that are actively involved in the relevant market. The categorization of an investment within the hierarchy is based upon the pricing transparency of the investment and does not necessarily correspond to management's perceived risk of that investment.

Adams Street 2019 Non-US Fund LP

Notes to Financial Statements

December 31, 2024

Foreign Currency Translation

Investments and unfunded commitments in currencies other than US dollar are translated into US dollar at the exchange rates on the valuation date. Transactions in currencies other than US dollar are translated into US dollar at the exchange rate on the date of the transaction.

The Fund does not isolate that portion of the results of operations arising from the effect of changes in foreign exchange rates on investments from fluctuations arising from changes in market prices of investments held. Those fluctuations are included with net realized and unrealized gain or loss from investments in the Statement of Operations.

Income Taxes

Fund taxable income or loss is reported by the partners individually and, accordingly, no provision has been made for taxes based on income. The Fund provides for state replacement and other tax expense, as applicable.

The Fund files Federal, Illinois and other state tax returns as required by law. Management has reviewed the Fund's tax positions and has not identified any uncertain tax positions which would require the Fund to record a tax exposure reserve. The Fund's four most recent tax years remain subject to examination by taxing authorities in those jurisdictions.

Investments

The following table presents the investments carried at fair value on the Statement of Financial Condition as of December 31, 2024 by the ASC 820-10 valuation hierarchy (as described above):

Fair Value Measurements as of December 31, 2024

Level 1	Level 2	Level 3	Investments measured at net asset value	Total
\$436,144.50	\$0.00	\$1,332,004.04	\$253,041,190.72	\$254,809,339.26

Adams Street 2019 Non-US Fund LP

Notes to Financial Statements

December 31, 2024

The classification of an investment as Level 3 is based upon the significance of the unobservable inputs to the overall fair value measurement. However, Level 3 financial investments typically include, in addition to unobservable or Level 3 inputs, observable inputs (that is, inputs that are actively quoted and can be validated to market sources). Transfers into Level 3, if any, may represent distributions of privately-traded stock from the limited partnership investments and privately-held investments not measured at net asset value. Transfers out of Level 3, if any, represent securities which have become publicly registered.

For the year ended December 31, 2024, the Fund had investments that transferred into Level 3 valued at \$1,332,004.04.

The following table provides a summary of valuation techniques and quantitative inputs and assumptions used for investments categorized in Level 3 of the fair value hierarchy as of December 31, 2024.

Investment Purpose	Fair Value at December 31, 2024	Valuation Technique(s)	Unobservable Input(s)	Range
Buyout	\$1,332,004.04	Inputs not developed by management	N/A	N/A
Total Level 3 Investments	\$1,332,004.04			

Some investments categorized as Level 3 are valued using unobservable inputs not developed by management. Management assesses the reasonableness of the resulting fair values by comparison to market comparable companies combined with management's assessment of the performance of the company since initial investment.

While management believes its valuation methods are appropriate and consistent with those used by other market participants, the use of different methodologies or assumptions to estimate the fair value of investments in non-marketable privately held investment funds could result in a different estimate of fair value at the reporting date. Those fair value estimates, including those carried at net asset value, may differ significantly from the values that would have been determined had a readily available market for such investments existed, or had such investments been liquidated or sold to non-affiliated investors, and these differences could be material to the financial statements.

Adams Street 2019 Non-US Fund LP

Notes to Financial Statements

December 31, 2024

Management Fee

The annual management fee to the Advisor is calculated and paid quarterly in arrears on the last business day of the quarter. The fee is based upon each limited partner's respective subscription agreement and ranges from 0.40% to 1.00% of the limited partner's capital committed to the Fund. Management fees are reduced in certain years in accordance with the terms of the Fund Agreement.

To the extent the Advisor receives compensation from investments, management fees are reduced by 100% of such compensation. Such reductions, if any, are included in the Statement of Operations.

Partners' Equity

Equity Contributions

Committed capital, equity contributions paid, and unfunded capital commitments are as follows at December 31, 2024:

	<u>Committed Capital</u>	<u>Equity Contributions Paid</u>	<u>Unfunded Capital Commitments</u>
General Partner	\$ 420,000	339,571	80,429
Special Limited Partner	1,225,000	990,413	234,587
Limited Partners	259,986,250	210,198,886	49,787,364
Balance at December 31, 2024	<u>\$ 261,631,250</u>	<u>211,528,870</u>	<u>50,102,380</u>

Unfunded capital commitments will be called as needed to purchase investments and to pay expenses of the Fund. Equity contributions are called from the partners in proportion to their commitment amounts.

Allocation of Income and Expenses

Income and expenses of the Fund are allocated to the partners in accordance with the terms of the Fund Agreement. The General Partner is allocated a carried interest of 10% of the cumulative profits from secondary investments after limited partners have received a preferred return of 7% on capital contributions used to make secondary investments. Secondary carried interest will be paid to the General Partner after each limited partner has received distributions equal to such partner's aggregate capital contributions that were used for secondary investments plus the applicable preferred return. In addition, the General Partner is allocated a carried interest of 10% of the cumulative profits from co-investments after limited partners have received a preferred return of 7%

Adams Street 2019 Non-US Fund LP

Notes to Financial Statements

December 31, 2024

on capital contributions used to make co-investments. Co-investment carried interest will be paid to the General Partner after each limited partner has received distributions equal to such partner's aggregate capital contributions that were used for co-investments plus the applicable preferred return. If the limited partners have received a preferred return of 7% on all contributions to the Fund then the General Partner will be allocated carried interest on cumulative profits from both secondary investments and co-investments even if the preferred return related specifically to each investment type has not been reached.

Cumulative incentive allocated to the General Partner at December 31, 2024 and December 31, 2023 was \$5,425,653 and \$5,261,859, respectively. Cumulative incentive allocation paid to the General Partner at December 31, 2024 and December 31, 2023 was \$883,544 and \$644,544, respectively.

Distributions

Distributions are made at the discretion of the General Partner in accordance with the terms of the Fund Agreement. All cash or securities received by the Fund that are attributable to investments other than secondary investments and co-investments shall be distributed to all partners in proportion to their respective ownership interests. All cash or securities received by the Fund that are attributable to secondary investments and co-investments shall be tentatively apportioned among the partners in proportion to their respective percentage interests. Amounts so apportioned to the General Partner shall be distributed to it, and amounts so apportioned to each limited partner shall be distributed in accordance with the waterfall calculation per the Fund Agreement, which is consistent with the allocation of income and expenses as discussed above.

Commitments and Contingencies

As of December 31, 2024 the Fund has unfunded commitments of \$65,703,897. The unfunded portion of the commitment is a contractual obligation to be met in accordance with the terms of the specific partnership agreements. Because of the inherent uncertainty in predicting the timing of these commitments, management is unable to estimate the fair value of these commitments. The Fund believes that it will be able to satisfy such commitments from commitments due from the Fund's limited partners, if any, and/or proceeds received from investments.

Adams Street 2019 Non-US Fund LP

Notes to Financial Statements

December 31, 2024

Line Of Credit

The following disclosure provides a summary of the terms of the line of credit facility that the Fund had access to during the year.

As of December 31, 2024:

Facility Lender	BMO Harris
Facility Capacity, Maximum	\$14,000,000
Maturity Date	On Demand
Interest Rate	Greater of PRIME rate less 0.75% or SOFR 3 Month Term Rate plus 2.275%
Outstanding Balance	\$0
Total Borrowings in 2024	\$8,889,329
Total Paydowns in 2024	\$11,689,573
Expenses Related to the Facility in 2024	\$199,481

Financial Highlights

Financial highlights are calculated for the limited partners taken as a whole. An individual limited partner's return and ratios may vary based on different management fee arrangements. The IRR and expense ratio calculations presented include the effects of borrowing during the period, if any. The timing of limited partner contributions and distributions and the net asset value of the Fund would be different if borrowing was not used, and the differences could be material.

The Fund's since inception Internal Rate of Return (IRR) for the limited partners is net of management fees and incentive allocation and is computed based on the actual dates of limited partner equity contributions and distributions and the ending aggregate limited partners' equity balances (residual value).

IRR, since inception through December 31, 2024	12.43%
IRR, since inception through December 31, 2023	21.25%

Adams Street 2019 Non-US Fund LP

Notes to Financial Statements

December 31, 2024

The net investment income/loss and operating expense ratios are computed using the weighted average net assets for the Fund. These ratios do not reflect the Fund's proportionate share of income and expenses of the underlying investment vehicles. The net investment income/loss and operating expense ratios presented on a committed capital basis are presented as supplemental disclosures to the required information.

For the year ended December 31, 2024:

Ratio to average net assets:

Net investment income/loss (not including incentive allocation)	-0.67%
Operating expenses	-0.91%
Incentive allocation	<u>-0.06%</u>
Total expenses and incentive allocation	-0.97%

Ratio to committed capital:

Net investment income/loss (not including incentive allocation)	-0.67%
Operating expenses	-0.90%
Incentive allocation	<u>-0.06%</u>
Total expenses and incentive allocation	-0.96%

Average net assets, computed quarterly	\$258,943,758
Committed capital	\$259,986,250
% Funded	80.85%

Subsequent Events Evaluation

The Fund has evaluated the need for disclosures and/or adjustments resulting from subsequent events through April 25, 2025, the date the financial statements were available to be issued. This evaluation did not result in any subsequent events that necessitated disclosures and/or adjustments.

Adams Street 2019 Non-US Fund LP
2024 Form 5500, Schedule H
FEIN 83-2227716, Plan Number 001
Item 4i - Schedule of Assets (Held At End of Year)

Investments	Cost	Fair Value
Advent International GPE IX	12,238,643	17,126,776
Aleph III	7,960,036	8,443,918
Astorg VIII	4,508,457	4,627,491
Centurium Capital Partners II	3,832,595	3,005,301
DBAG Fund VIII A	4,989,059	5,147,155
DBAG Fund VIII B	790,801	1,183,569
Gaorong Partners Fund V, L.P.	11,553,668	13,358,682
Headline US VI, L.P.	484,430	633,644
Hg Mercury 3 A	4,592,518	7,300,317
Index Ventures Growth V	12,705,071	15,533,232
MED Platform I SLP - Compartment 1	2,404,276	3,659,672
MED Platform I SLP - Compartment 2	1,945,800	3,844,765
Medicxi III	5,614,924	5,201,971
Nordic Capital X Beta LP	8,238,181	11,493,805
Oakley Capital IV-B SCSp	7,000,500	9,837,214
Project Grand First	5,757,831	5,362,500
Shunwei China Internet Fund V LP	2,028,725	2,080,167
Shunwei China Internet Opportunity Fund IV LP	1,606,415	1,721,453
Sunrise Capital IV	8,921,578	6,036,162
SWC Global Fund LP	811,421	776,769
TLV Partners Opportunity Fund	7,335,000	9,161,099
VIP IV	11,050,690	13,237,465
Vitalbridge Fund II	5,570,955	5,741,989
WestCap Strategic Operator Fund II LP	324,454	380,299
Zhen Fund Partners VI	5,496,508	5,503,527
ABRY Partners VII	140,792	113,687
ABRY Partners VIII	392,583	260,725
ABRY Senior Equity IV	80,925	62,365
ABRY Senior Equity V	566,928	784,116
Accel-KKR Capital Partners CV III	2,761,115	7,042,432
Accel-KKR Capital Partners CV IV LP	1,677,187	1,962,224
Accel-KKR Capital Partners CV IV Strategic LP	190,288	188,179
Altor Fund II	20,996	48,767
Altor Fund III	317,926	340,951
Altor Fund IV	679,432	538,906
Astorg IQ-EQ Fund	732,516	1,614,832
Bain Capital Europe Fund III	133,668	38,302
Bain Capital Fund X	218,498	136,090
Berkshire Fund IX, L.P.	1,615,443	2,340,151
Berkshire Fund VI, Limited Partnership	75,678	62,249
Berkshire Fund VII, L.P.	27,677	59,138
Berkshire Fund VIII, L.P.	2,755,477	1,574,679
Berkshire Fund VIII-A, L.P.	462,251	286,984
BV eVenture Fund II	450,744	223,788
Charlesbank Equity Fund IX	521,461	761,561
Charlesbank Equity Fund VIII	513,236	367,348
CVC Capital Partners VI	335,744	309,448
Eurazeo Capital IV B SCSp	2,105,230	2,364,663
Eurazeo Capital IV D SCSp	1,061,787	562,574

Adams Street 2019 Non-US Fund LP
2024 Form 5500, Schedule H
FEIN 83-2227716, Plan Number 001
Item 4i - Schedule of Assets (Held At End of Year)

Investments	Cost	Fair Value
Eurazeo Growth Fund III SLP	662,876	549,868
Eurazeo Growth Secondary Fund SCSp	2,275,795	2,639,578
eVentures Fonds 2 Gmbh & Co. KG	418,385	481,286
FTV IV	0	1,390,597
FTV V	1,202,657	5,828,326
FTVentures III	636,120	932,022
G Square CV	2,987,522	2,942,239
HPE Continuation Fund I CV	1,387,558	1,478,752
HPE PPRO Invest II BV	48,817	52,954
Icon Partners III	1,238,577	1,662
Icon Software Partners	25,969	1,402,637
Lion/Simba Investors	268,880	573,639
Madison Dearborn Capital Partners VI	134,813	813
Marlin Credit Opportunities L.P	165,998	155,338
Marlin Equity III	58,687	12,100
Marlin Equity IV	516,359	458,432
Marlin Heritage	174,795	84,861
Marlin Heritage Europe	192,861	307,633
Oak Hill Capital Partners V LP	1,045,769	1,972,266
Pegasus WSJLL Fund LP	1,775,884	2,065,548
Permira IV Feeder LP	2,518,223	5,520,883
Providence Equity Partners VI	90,477	3,599
Rho Ventures VI	1,479,362	836,834
Sagamore China Partners III LP	943,403	1,180,766
Sagamore China Partners IV LP	1,141,064	1,326,307
Serent Capital Fund I	242,229	394,479
Shunwei China Internet Fund III	144,051	481,873
ShunWei China Internet Opportunity II	192,660	638,307
STG IV	599,344	164,800
University Ventures Fund II	1,247,510	1,722,195
University Ventures SPV-1, L.P.	7,781	584,711
Warburg Pincus Private Equity X	477,537	132,024
Warburg Pincus Private Equity XI	479,730	473,807
Warburg Pincus Private Equity XII	1,543,516	2,079,922
Waterland Strategic Opportunities Fund I	960,807	2,398,218
WestCap Strategic Operator Fund LP	1,336,757	1,065,395
WestCap STUB LLC	216,389	222,188
WestCap VG LLC	24,753	24,934
Paymentus Corporation	497,034	436,144
58.com	1,323,868	1,424,762
Aidite Technology Co., Ltd.	470,100	1,178,589
Expereo International B.V.	1,534,692	1,332,004
Gaosi Education Group	1,031,159	256,662
Independent Vetcare Limited	309,847	2,116,023
Inherent	1,292,694	1,774,724
Jio Platforms Limited	1,460,864	2,121,263
Leqee Group Limited II	1,539,815	1,258,556
LGC	1,059,373	1,791,202
MessageBird B.V.	1,549,398	1,527,444
MYOB Group Limited	1,107,231	1,469,286

Adams Street 2019 Non-US Fund LP
2024 Form 5500, Schedule H
FEIN 83-2227716, Plan Number 001
Item 4i - Schedule of Assets (Held At End of Year)

Investments	Cost	Fair Value
Norstella	236,546	728,824
O-Net Technologies	1,307,746	1,799,580
Partnered Health	970,896	830,130
Reliance Retail Limited	1,554,073	2,503,686
Shandong Taishan Beer Co Ltd	2,212,196	2,452,088
Symeres	1,442,534	1,251,203
Visma	998,493	2,136,963
Windstar Medical GmbH	1,322,447	594,152
Zhejiang New Century Hotel Management Co., Ltd.	810,625	801,162
JPMorgan US Government Money Market Fund	5,546,365	5,546,365
Total Investments	214,042,032	260,355,704

<p>Form 5500</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p>This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p>2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

B This return/report is: a single-employer plan a DFE (specify) E
 the first return/report the final return/report
 an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here

D Check box if filing under: Form 5558 automatic extension the DFVC program
 special extension (enter description)

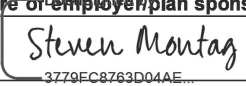
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here

Part II Basic Plan Information - enter all requested information

1a Name of plan ADAMS STREET 2019 NON-US FUND LP	1b Three-digit plan number (PN) ▶	001
	1c Effective date of plan	
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) ADAMS STREET PARTNERS, LLC	2b Employer Identification Number (EIN) 83-2227716	
	2c Plan Sponsor's telephone number 312-553-7890	
ONE NORTH WACKER DRIVE STE 2700 CHICAGO, IL 60606-2823	2d Business code (see instructions) 000000	

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE			
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of Employer/Plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	 <small>3779EC8763D04AE...</small>	10/15/2025	STEVEN MONTAG
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

**Form 5500 (2024)
v. 240311**

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN 83-2227716 3c Administrator's telephone number 312-553-7890
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4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN																																	
5 Total number of participants at the beginning of the plan year	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">5</td> <td style="width:80%;"></td> <td style="width:10%; text-align: right;">0</td> </tr> </table>	5		0																														
5		0																																
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1), 6a(2), 6b, 6c, and 6d).	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;"></td> <td style="width:80%;"></td> <td style="width:10%;"></td> </tr> <tr> <td>6a(1)</td> <td>Total number of active participants at the beginning of the plan year</td> <td style="text-align: right;">0</td> </tr> <tr> <td>6a(2)</td> <td>Total number of active participants at the end of the plan year</td> <td style="text-align: right;">0</td> </tr> <tr> <td>6b</td> <td>Retired or separated participants receiving benefits</td> <td style="text-align: right;">0</td> </tr> <tr> <td>6c</td> <td>Other retired or separated participants entitled to future benefits.</td> <td style="text-align: right;">0</td> </tr> <tr> <td>6d</td> <td>Subtotal. Add lines 6a(2), 6b, and 6c.</td> <td style="text-align: right;">0</td> </tr> <tr> <td>6e</td> <td>Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.</td> <td style="text-align: right;">0</td> </tr> <tr> <td>6f</td> <td>Total. Add lines 6d and 6e.</td> <td style="text-align: right;">0</td> </tr> <tr> <td>6g(1)</td> <td>Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)</td> <td style="text-align: right;">0</td> </tr> <tr> <td>6g(2)</td> <td>Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)</td> <td style="text-align: right;">0</td> </tr> <tr> <td>6h</td> <td>Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested</td> <td style="text-align: right;">0</td> </tr> </table>				6a(1)	Total number of active participants at the beginning of the plan year	0	6a(2)	Total number of active participants at the end of the plan year	0	6b	Retired or separated participants receiving benefits	0	6c	Other retired or separated participants entitled to future benefits.	0	6d	Subtotal. Add lines 6a(2), 6b, and 6c.	0	6e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	0	6f	Total. Add lines 6d and 6e.	0	6g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	0	6g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	0	6h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	0
6a(1)	Total number of active participants at the beginning of the plan year	0																																
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6h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	0																																
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">7</td> <td style="width:80%;"></td> <td style="width:10%; text-align: right;">0</td> </tr> </table>	7		0																														
7		0																																

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules (1) <input type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> DCG (Individual Plan Information) - Number Attached _____ (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information - Small Plan) (3) <input type="checkbox"/> A (Insurance Information) - Number Attached _____ (4) <input checked="" type="checkbox"/> C (Service Provider Information) (5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) Yes No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) Yes No

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____