Form 8918 (Reviewed 2007)

Material Advisor Disclosure Statement

OMB No. 1545-0865

 See separate instructions. FOR IRS USE ONLY Note: The reportable transaction number will be sent to the material advisor's address below. Material Advisor's Name (see instructions) Telephone number Number, street, and room or suite no. City or town, state, and ZIP code Contact person name (last name, first name, middle initial) Telephone number is this a protective disclosure? (see instructions) If "Yes," see Line 6a instructions. is this the original Form 8918 for this reportable transaction? Yes If "Yes," go to Line 1. If "No," enter the reportable transaction number previously issued for this reportable transaction or tax shelter. Reportable Transaction Number ▶ 1 Name of reportable transaction (see instructions) Identify the type of reportable transaction. Check all the box(es) that apply (see instructions). a Listed **c** Contractual protection e Transaction of interest **b** Confidential **d** Loss f Brief asset holding period 3 If you checked box 2a or 2e, enter the published guidance number for the listed transaction or transaction of interest ▶ 4 Enter the date the Material Advisor became a material advisor with respect to the reportable transaction (see instructions) 5 If you are a party to a designation agreement, identify the other parties (see instructions). Name identifying number (if known) Address (Number, street, and room or suite no.) City or town, state, and ZIP code Contact name Telephone number 6a Provide a brief description of the type of material aid, assistance, or advice you provided (see instructions). b to the extent known describe the role of any other entity(ies) or individual(s) who also provided material aid, assistance, or advice to this transaction and include each entity's and individual's complete name, identifying number (if known), and address. 7a To obtain the intended tax benefits generated by the transaction: ☐ Yes □ No Is a related entity(ies) or individual(s) needed? Is a foreign entity(ies) or individual(s) needed? No ☐ No Yes Is a tax-exempt entity(ies) needed? b If you answered "Yes" to any of the above questions, describe the role of each individual or entity. Also identify the individual's or entity's country of existence if a particular country is required to obtain the intended tax benefits. 8a To obtain the intended tax benefits generated by the transaction, is income or gain from the transaction allocated directly or indirectly to an individual(s) or entity(ies) that has a net operating loss and/or unused loss or credits? b If "Yes," describe the role of each individual or entity in the transaction.

Cat. No. 39533A

	(Rev. 9-2007) tify the types of financial instruments used in this transaction (see instructions).	Page 2
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Estin	mated Tax Benefits—Identify the type of tax benefit generated by the transaction that	t you expect the taxpayer to claim in each year.
Chec	ck all boxes that apply (see instructions).	
	Deductions	U Other
	Ordinary loss Adjustments to basis Absence of adjustments	to basis
Timir such	ng of Tax Benefits—If you checked one or more boxes on Line 10, check the applicant tax benefits are claimed. Check each box that applies.	able box below to identify the period in which
	Tax benefits generated by the transaction are required to be claimed in the first year	(Ces)
i i	Tax benefits may be claimed in another year by the taxpayer.	or participation by the taxpayer.
Enter	r the Internal Revenue Code section(s) used to claim tax benefit(s) generated by the	transaction. (Attach additional sheets if necessary
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		nestri
Desc	cribe the reportable transaction for which you provided material aid, assistance or ad	lvice, including but not limited to the following:
bene	nature of the expected tax treatment and expected tax benefits generated by the transfits are expected to be claimed, the role of the entities or individuals mentioned in li	nes 7a or 8a (if anv) and the role of the financial
instru	uments mentioned in line 9 (if any). Explain how the Internal Revenue Code sections axpayer to obtain the desired tax treatment. Also, include a description of any tax re	listed in line 12 are applied and how they allow
trie ta	axpayer to obtain the desired tax treatment. Also, include a description of any tax re	suit protection with respect to the transaction.
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	Under penalties of perjury, I declare that I have examined this return, and to the best of my	
ease	Declaration of preparer (other than Material Advisor) is based on all information of which prepa	rer has any knowledge.
gn	A STATE OF THE STA	
re	Signature of Material Advisor Date	Title
	Print name	
	Preparer's Date	Check if Preparer's SSN or PTIN
d parer's	signature	self- mployed ▶ □
Only	Firm's name (or yours if self-employed),	EIN >
_/	address, and ZR code	Phone no. > (
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