(Rev. March 2011)

Reportable Transaction Disclosure Statement

▶ Attach to your tax return.

OMB No. 1545-1800

Attachment Sequence No. **137**

Department of the Treasury Internal Revenue Service		► See separate instructions.						Sequence No. 137	
		individuals enter last name, first	name, ı	e, middle initial)			Identifying number		
Number, street, and room or suite no.				City or town				State	ZIP code
A B	each Form 8886 a Enter the form nur	ore than one Form 8886 with you not enter the statement number to the tax return to which the tax return identified above	for this I nis form	Form 8886 is attached or rel	► Statem ated		▶_	of	
	Is this Form 8886	being filed with an amended tax	return?				▶	Yes	☐ No
С	Check the box(es)	that apply (see instructions).		☐ Initial year file	r Protectiv	e disclosur	·e		
1 a	Name of reportabl	e transaction							
1 b	Initial year participated in transaction 1 c Reportable transaction or tax shelter registration number (see instructions)								
2 a b									
3	of interest	x 2a or 2e, enter the published g							
4 5	If you participated	of "same as or substantially simi in this reportable transaction th ation below for the entity(s) (see	rough a	a partnership, S co	orporation, trust, and for	oreign entity	_	e applicabl	le boxes and
а	Type of entity		_	▶ ☐ Partnership ☐ Trust☐ S corporation ☐ Foreign		☐ Partnership☐ S corporation		☐ Trust ☐ Foreign	
b	Name		. ▶						
С	Employer identification	ation number (EIN), if known	.▶						
d		1 received from entity hedule K-1 not received)	.▶						
6		ame and address of each indivic d, or recommended your partici ry.)		, ,	,				
а	Name				Identifying number (if known)		Fees paid \$		
	Number, street, ar	nd room or suite no.		City or town				State	ZIP code
b	Name				, , ,		Fees pa	uid	
	Number, street, ar	nd room or suite no.		City or town				State	ZIP code

Page 2 Form 8886 (Rev. 3-2011) 7 **Facts** a Identify the type of tax benefit generated by the transaction. Check all the boxes that apply (see instructions). Absence of adjustments to basis ☐ Tax Credits Deductions Exclusions from gross income ☐ Capital loss ☐ Nonrecognition of gain Deferral Other Ordinary loss ☐ Adjustments to basis b Further describe the amount and nature of the expected tax treatment and expected tax benefits generated by the transaction for all affected years. Include facts of each step of the transaction that relate to the expected tax benefits including the amount and nature of your investment. Include in your description your participation in the transaction and all related transactions regardless of the year in which they were entered into. Also, include a description of any tax result protection with respect to the transaction. Identify all individuals and entities involved in the transaction that are tax-exempt, foreign, or related. Check the appropriate box(es) (see instructions). Include their name(s), identifying number(s), address(es), and a brief description of their involvement. For each foreign entity, identify its country of incorporation or existence. For each individual or related entity, explain how the individual or entity is related. Attach additional sheets, if necessary. Foreign Related Type of individual or entity: Tax-exempt Name Identifying number Address Description Foreign Related Type of individual or entity: ☐ Tax-exempt b Name Identifying number Address Description