## Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

## Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

P	art I	Reporting	Issuer								
1	Issuer's	name				2 Issuer's employer identification number (EIN	I)				
_	Name of	contact for ad	ditional information	1	Telephone No. of contact	5 Email address of contact					
3	Name of contact for additional information			-	relephone No. of contact	J Email address of contact					
6	Number and street (or P.O. box if mail is not deli				ivered to street address) of contact	7 City, town, or post office, state, and ZIP code of conta	act				
8	Date of action				9 Classification and description						
10	CLISID n	umber	11 Serial number	(c)	12 Ticker symbol	13 Account number(s)	_				
10	CUSIP number 11 Serial number(s)		(5)	12 Ticker Symbol	13 Account number(s)						
Р	art II	Organizatio	onal Action Atta	ch a	additional statements if needed. S	See back of form for additional questions.	_				
14		Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for									
	the act	ion ▶									
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15	Describ	Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per									
	share or as a percentage of old basis ▶										
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16	Descril	oe the calculati	on of the change in t	oasis	s and the data that supports the calcu	ulation, such as the market values of securities and the					
		on dates ►	_								
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Pai	rt II	Organizational Action (continued)			
17	List th	ne applicable Internal Revenue Code section(	s) and subsection(s) upon which the tax tr	eatment is based ▶	
18	Can a	ny resulting loss be recognized? ▶			
19	Provid	de any other information necessary to implem	nent the adjustment, such as the reportabl	e tax year ►	
Sigr	bel	der penalties of perjury, I declare that I have exam lief, it is true, correct, and complete. Declaration of p			
Her	_	gnature▶ A signed copy is main	rtained by the issuer	Date ►	
	0.9			·	
	Pri	nt your name ▶		Title ►	
Pai	d	Print/Type preparer's name	Preparer's signature A signed copy is maintained by	Date	Check if if self-employed
	pare		· · · · · · · · · · · · · · · · · · ·	1	Firm's EIN ▶
USE	Onl	Firm's address ►			Phone no.

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054