Form (Rev. December 2007)

Department of the Treasury Internal Revenue Service

Reportable Transaction Disclosure Statement

OMB No. 1545-1800

► Attach to your tax return.

► See separate instructions.

Attachment Sequence No. **137**

Name(s) shown on return (individuals enter last name, first name, middle initial)				Identifying number	
Numb	per, street, and room or suite no.				
City o	or town, state, and ZIP code				
A	If you are filing more than one Form 8886 with your tax return, sequentially number each Form 8886 and enter the statement number for this Form 8886 > Statement number of				
В	Enter the form number of the tax return to which this form is attached or related				
	Enter the year of the tax return identified above				
	Is this Form 8886 being filed with an amended tax return?				
С	Check the box(es) that apply (see instructions).				
1a	Name of reportable transaction				
1b	Initial year participated in transaction		Reportable transaction or (9 digits or 11 digits)	ax shelter registration number	
2	Identify the type of reportable transaction. Check all boxes that apply (see instructions).				
а	☐ Listed c ☐ Contractual pro	tection e	☐ Brief asset holding period		
b					
3	If you checked box 2a or 2f, enter the published guidance number for the listed transaction or transaction of interest				
4	Enter the number of "same as or substantially similar" transactions reported on this form				
5	If you participated in the transaction through another entity, check all applicable boxes and provide the information below for the entity (see instructions). (Attach additional sheets, if necessary.)				
а	Type of entity:			Partnership	
		☐ S corpo	oration	S corporation	
		☐ Trust	إ	Trust	
		☐ Foreign	·	Foreign	
c	Name				
d	Date Schedule K-1 received from entity (enter "none" if Schedule K-1 not received)				
6	Enter below the name and address of each individual or entity to whom you paid a fee with regard to the transaction if the individual or entity promoted, solicited, or recommended your participation in the transaction, or provided tax advice related to the transaction. (Attach additional sheets, if necessary.)				
а	Name		Identifying number (if known	Fees paid	
	Number, street, and room or suite no.				
	ity or town, state, and ZIP code				
b	Name		Identifying number (if known	Fees paid	
	Number, street, and room or suite no.				
	City or town, state, and ZIP code	City or town state and 7ID code			
	only or lown, state, and ZIF Code				

Page 2 Form 8886 (Rev. 12-2007) **Facts** a Identify the type of tax benefit generated by the transaction. Check all the boxes that apply (see instructions). Other _ Deductions ☐ Tax credits Exclusions from gross income ☐ Capital loss Deferral ■ Nonrecognition of gain ☐ Absence of adjustments to basis 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 tax-exempt, foreign, and related entities and individuals involved in the transaction. 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 related entity, explain how it is related. (Attach additional sheets, if necessary.) Related ☐ Tax-exempt Foreign a Type of entity: Identifying number Name Address Description ☐ Tax-exempt Foreign Related **b** Type of entity: Identifying number Name Address Description