Form **8937**(December 2011) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-2224

		D	1		•				
_	art I	Reporting	issuer				1		
1	Issuer's	name		2 Issuer's employer identification number (EIN					
_	Nama	of contact for ad-	ditional information	4 T	elephone No. of cont	ant	5 Email address of contact		
3	Name of contact for additional information 4				elephone No. of Cont	acı	5 Email address of contact		
6	Number and street (or P.O. box if mail is not delivered to street address) of contact						7 City, town, or post office, state, and Zip code of conta		
Ŭ	11011100	i dila oti oot (oi i	.c. box ii maii io not	1 only, town, or post onlos, state, and Elp code of conta					
8	Date of action				9 Classification and	description			
						·			
10	CUSIP number 11 Serial number(s)			(s)	12 Ticker	symbol	13 Account number(s)		
P	art II	Organization	onal Action Atta	ch ad	ditional statements	if needed. S	See back of form for additional questions.		
14	Descr	ibe the organiza	itional action and, if a	applica	able, the date of the a	action or the d	date against which shareholders' ownership is measured for		
	the ac	ction ►							
15	Donor	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							
13			age of old basis ►	ailizati					
	Silaic	or as a percent	age of old basis F						
16	Descr	ibe the calculati	on of the change in b	oasis a	and the data that sup	ports the calcu	culation, such as the market values of securities and the		
	valuat	tion dates ►							

Par	i II	0	Organizational Action (continued)							
17	List th	ne ap	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶							
18	Can a	nv r	esulting loss be recognized?							
.0	Ourra	ally i								
19	Provid	de ai	ny other information necessary to imple	ement the adjustment, such as the report	able tax yea	ar ▶				
				mined this return, including accompanying scl						
		lief, it	is true, correct, and complete. Declaration o	of preparer (other than officer) is based on all in	formation of	which prepa	rer has any knowledge.			
Sign										
Here	Sig	gnatu	re▶Signature on file		_ Date ►	1	/18/17			
			•							
		_	our name ► Print/Type preparer's name	Preparer's signature	Title ► Date		OL L D : PTIN			
Paic			The Type property strains				Check if self-employed			
Prep			Firm's name				Firm's EIN ▶			
Use	Onl		Firm's name				Phone no.			
Send	Form	_		to: Department of the Treasury, Internal	Revenue Se	ervice, Ogd				