

Reportable Transaction Disclosure Statement

▶ **Attach to your tax return.**
 ▶ **See separate instructions.**

Name(s) shown on return	Identifying number
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Number, street, and room or suite no. _____

City or town, state, and ZIP code _____

A Enter the form number of the tax return that this form is attached to ▶ _____
 Enter the year of the tax return with which this form is filed ▶ _____

B Check the box(es) that apply (see instructions).

Initial year filer

Protective disclosure

1a Name of reportable transaction _____

1b Initial year participated in transaction	1c Material advisor or tax shelter registration number (9 digits or 11 digits)
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2 Identify the type of reportable transaction. Check all the box(es) that apply (see instructions).

a <input type="checkbox"/> Listed transaction	d <input type="checkbox"/> Loss
b <input type="checkbox"/> Confidential	e <input type="checkbox"/> Significant book-tax difference
c <input type="checkbox"/> Contractual protection	f <input type="checkbox"/> Brief asset holding period

3 If the transaction is a "listed transaction" or substantially similar to a listed transaction, identify the listed transaction (see instructions) ▶ _____

4 Enter the number of transactions reported on this form ▶ _____

5 If you invested in the transaction through another entity, such as a partnership, an S corporation, or a foreign corporation, provide the information below for the entity.

a Name ▶ _____

b Type of entity ▶ _____

c Form number of tax return filed ▶ _____

d Employer identification number (EIN) ▶ _____

6 Enter below, the name and address of each person to whom you paid a fee with regard to the transaction if that person promoted, solicited, or recommended your participation in the transaction, or provided tax advice related to the transaction. (Attach additional sheet, if necessary.)

a Name _____

Number, street, and room or suite no. _____

City or town, state, and ZIP code _____

b Name _____

Number, street, and room or suite no. _____

City or town, state, and ZIP code _____

