



**Part II Organizational Action** (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ►  
**INTERNAL REVENUE CODE SECTION 301(c)(1) AND 301(c)(2).**

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18 Can any resulting loss be recognized? ► **NO**

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19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ►  
**THE REPORTABLE TAX YEAR IS 2016.**

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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature ► \_\_\_\_\_ Date ► \_\_\_\_\_  
Print your name ► \_\_\_\_\_ Title ► \_\_\_\_\_

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>RANDY BARRUS</b>	Preparer's signature 	Date <b>2-8-17</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00690169</b>
	Firm's name ► <b>BAKER TILLY VIRCHOW KRAUSE, LLP</b>	Firm's EIN ► <b>39-0859910</b>			
	Firm's address ► <b>8219 LEESBURG PKE, SUITE 800, TYSONS, VA 22182</b>	Phone no. <b>(703) 923-8622</b>			