Note: Form 8886 (Rev. March 2011) begins on the next page.

The zip code for where to file separately an exact copy of the initial year filing of Form 8886 has changed from 84404 to 84201.

The complete address to which it should be mailed is:

Internal Revenue Service OTSA Mail Stop 4915 1973 Rulon White Blvd. Ogden, Utah 84201

Form 8886		Reportable Transaction Disclosure Statement					OMB No. 1545-1800						
(Rev. March 2011) Department of the Treasury Internal Revenue Service		- ► Attach to your tax return. ► See separate instructions.					Attachment Sequence No. 137						
		dividuals enter last name, first name, i	middle initial)		I	Identifying I	number						
Numbe	er, street, and room or	suite no.	City or town				State	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											
		ing filed with an amended tax return?					Yes	∐ No					
C Check the box(es) that apply (see instructions).													
1a	Name of reportable	transaction											
1b	Initial year participated in transaction 1 c Reportable transaction or tax shelter registration number (see instructions)												
2 a b	Identify the type of reportable transaction. Check all boxes that apply (see instructions). Listed c Contractual protection e Transaction of interest Confidential d												
3	If you checked box 2a or 2e, 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	provide the informat	ion below for the entity(s) (see instruct				спеск тпе а	арріїсар	le boxes and					
а	Type of entity	·····• [Partnership	Trust	Partne	•	Trus						
b	Name	·····•	S corporation	Foreign	S corp	oration	E Fore	ign					
с	Employer identification number (EIN), if known ►												
d	Date Schedule K-1 r (enter "none" if Sche	eceived from entity edule 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 that 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					Fees paid \$	es paid						
	Number, street, and	room or suite no.	City or town				State	ZIP code					
b Name			Identifying number (if I		known)	Fees paid \$							
	Number, street, and	room or suite no.	City or town				State	ZIP code					

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7	Facts									
а	Identify the type of tax benefit generated by the transaction. Check all the boxes that apply (see instructions).									
	Deductions Exclu	Tax Credits								
	Capital loss	ecognition of gain	🗌 Defe	erral						
		stments to basis	Othe	er						
b	years. Include facts of each step	of the transaction that r participation in the tran	relate to the expension and all re	cted tax benefits including the amo lated transactions regardless of th	by the transaction for all affected ount and nature of your investment. In year in which they were entered					
8	instructions). Include their name	e(s), identifying number(s), address(es), a	nd a brief description of their inv	heck the appropriate box(es) (see olvement. For each foreign entity, dividual or entity is related. Attach					
а	Type of individual or entity:	Tax-exempt	Foreign	Related						
Name					Identifying number					
Addres										
b	Type of individual or entity:	Tax-exempt	Foreign	Related						
Name					Identifying number					
Addres	SS									
Descri	ption									