

Part II Organizational Action (continued)

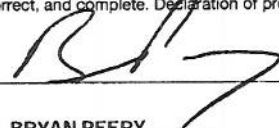
17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ IRC 301(c)(2)

18 Can any resulting loss be recognized? ▶ N/A

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ _____


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 ▶ 3/2/14

Print your name ▶ BRYAN PEERY Title ▶ VP

Paid Preparer Use Only

Print/Type preparer's name LARRY GOOD	Preparer's signature 	Date <u>3/2/14</u>	Check <input type="checkbox"/> if self-employed	PTIN P00540769
Firm's name ▶ DELOITTE TAX LLP	Firm's address ▶ 550 S. TRYON ST, STE 2500, CHARLOTTE, NC 28202		Firm's EIN ▶ 86-1065772	Phone no. 704-887-1500