## Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

## Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

P	art I	Reporting	Issuer							
1	Issuer's	name				2 Issuer's employer identification number (EIN	I)			
_	Name of	contact for ad	ditional information	1	Telephone No. of contact	5 Email address of contact				
3	Name of contact for additional information			-	relephone No. of contact	J Email address of contact	5 Email address of contact			
6	Number and street (or P.O. box if mail is not deli				ivered to street address) of contact	7 City, town, or post office, state, and ZIP code of conta	7 City, town, or post office, state, and ZIP code of contact			
8	Date of action				9 Classification and description					
10	CUSIP n	umber	11 Serial number	(c)	12 Ticker symbol	13 Account number(s)	_			
10	COSIF II	umbei	TI Serial Humber	(5)	12 Ticker Symbol	13 Account number(s)				
Р	art II	Organizatio	onal Action Atta	ch a	additional statements if needed. S	See back of form for additional questions.	_			
14		Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for								
	the act	ion ▶								
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15	Describ	oe the quantita	tive effect of the orga	aniza	ational action on the basis of the secu	urity in the hands of a U.S. taxpayer as an adjustment per				
	share o	or as a percenta	age of old basis ►							
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16	Descril	oe the calculati	on of the change in t	oasis	s and the data that supports the calcu	ulation, such as the market values of securities and the				
		on dates ►	_							
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Par	t II	Organizational Action (continued)		
17	List the	e applicable Internal Revenue Code section(s) and subsection(s)	upon which the tax treatment is based	·
18	Can an	y resulting loss be recognized? ►		
		,		
19	Provide	e any other information necessary to implement the adjustment,	such as the reportable tax year ▶	
			· -	
-				
	Lind	er penalties of perjury, I declare that I have examined this return, include	ling accompanying achadulas and statements	and to the heat of my knowledge and
		er penalties of perjury, i declare that i have examined this return, include ef, it is true, correct, and complete. Declaration of preparer (other than of		
Sign	,			-
Here	<b>.</b> I			
1101	Sign	ature >	Date ▶	
		your name ►  Print/Type preparer's name  Preparer's signature	Title ► Date	DTIN
Paid	t	Print/Type preparer's name Preparer's signature	Rowllika Pater 3/29/2023	Check if PTIN
Pre	parer		Treatment 1 2/ 27/ 2023	self-employed
	Only			Firm's EIN ▶
		Firm's address ▶		Phone no.
Send	Form 8	937 (including accompanying statements) to: Department of the	e Treasury, Internal Revenue Service, Og	den, UT 84201-0054