

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 Sections 301(c)(2) and 301(c)(3)

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 ▶ **For tax year beginning 02/01/2024 and ending 01/31/2025**

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 ▶ Kathryn Thompson Date ▶ 04/18/2024

Paid Preparer Use Only	Print your name ▶ Kathryn Thompson	Preparer's signature	Title ▶ VP, Global Tax Operations	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Print/Type preparer's name					
	Firm's name ▶				Firm's EIN ▶	
	Firm's address ▶				Phone no.	






Form 8937 - Q1 FY25 Dividend

Final Audit Report

2024-04-18

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