## 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

Part Repor	ting Issuer			
1 Issuer's name		2 Issuer's employer identification number (EIN)		
LMV Mountain View II REIT-DC, LP				81-5033047
Name of contact for additional information				5 Email address of contact
GARY CUTSON 212-765-0043			212-765-0043	support@a5reit.com
6 Number and street (or P.O. box if mail is not delivered to street address) of contact				7 City, town, or post office, state, and ZIP code of contact
AS DEIT Comices I I	C 45 Dooksfoller Dieze	Suite 2000		Now York NV 40444
A5 REIT Services LLC, 45 Rockefeller Plaza, Suite 2000  8 Date of action  9 Classification and description				New York, NY 10111
6/30/2023 Preferred Shares				
10 CUSIP number	11 Serial number	11 Serial number(s) 12 Ticker symbol		13 Account number(s)
			1	
Part II Organ	rizational Action Atta	ch additional sta	atements if needed. S	ee back of form for additional questions.
	-			ate against which shareholders' ownership is measured for
the action ► T		ons in excess of	its current and accum	ulated earnings and profits as follows:
\$00.00/3/full C 0/1 0/00/E0E0				
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	ercentage of old basis > T			rity in the hands of a U.S. taxpayer as an adjustment per is of the security, to the extent thereof, in the amount
	_			ulation, such as the market values of securities and the and profits were determined under IRC Section
	IRC Section 857(d) for a r			
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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 /s/ Gary A. Cutson for Here LMV Mountain View II R

Signature ► LMV Mountain View II REIT-DC, LP Date ► January 30, 2024

Print your name ► Gary A. Cutson Title ▶ Agent Print/Type preparer's name Preparer's signature Date PTIN Paid Check | if self-employed **Preparer** Firm's name **Use Only** Firm's EIN ▶ Phone no. Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054