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 Reporting Issuer			
1 Issuer's name	2 Issuer's employer identification number (EIN)		
LMV Edina REIT-DC, LP	81-2960986		
3 Name of contact for additional information	4 Telephone No. of contact	5 Email address of contact	
GARY CUTSON	212-765-0043	support@a5reit.com	
6 Number and street (or P.O. box if mail is no	t delivered to street address) of contact	7 City, town, or post office, state, and ZIP code of contact	
AS DEIT One land I O AS Dook Allow Black	0.14.0000	No. Work NW 10444	
8 Date of action	New York, NY 10111		
6/30/2023			
10 CUSIP number 11 Serial number	Preferred Shares (s) 12 Ticker symbol	13 Account number(s)	
Part II Organizational Action Atta	ch additional statements if needed. See	e back of form for additional questions.	
<u>-</u>	• •	e against which shareholders' ownership is measured for	
the action ► The Issuer made distribut \$60.00/share on 6/30/2023	ions in excess of its current and accumula	ated earnings and profits as follows:	
\$60.00/Share on 6/30/2023			
		ty in the hands of a U.S. taxpayer as an adjustment per	
	he excess distribution reduces the basis	of the security, to the extent thereof, in the amount	
listed in Box 14 above.			
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		tion, such as the market values of securities and the	
312 as modified by IRC Section 857(d) for a		<u> </u>	
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Part		Organizational Action (contin	nued)		. 490	
		3				
17 L	ist the	applicable Internal Revenue Code se	ection(s) and subsection(s) upon w	hich the tay treatment is based		
		uced under IRC Section 301(c)(2).				
Dusis	3 ICUI	deed under into Section 301(c)(z).	any distribution in excess of bas	is is treated as gain under in	C Section 301(c)(3).	
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18 Can any resulting loss be recognized? ► No						
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		any other information necessary to i				
The bas	sis ad	justment is effective on the payme	nt date identified in Box 14 abov	e	·	
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	Unde	er penalties of perjury, I declare that I have f, it is true, correct, and complete. Declarat	e examined this return, including accom	npanying schedules and statement	s, and to the best of my knowledge and	
0:	Dellei	/s/ Gary A. Cutson for	ion of preparer (other than officer) is ba	sed on all information of which prep	parer has any knowledge.	
0.9.1						
Here	Signa	ature LMV Edina REIT-DC, LP		_{Date} ▶ Januaı	y 30, 2024	
	Print	your name ► Gary A. Cutson		Title ► Agent		
Paid		Print/Type preparer's name	Preparer's signature	Date	Check if PTIN	
Prepa	rer				self-employed	
Use C		Firm's name ▶			Firm's EIN ▶	
		Firm's address ▶			Phone no.	
Send Fo	rm 89	937 (including accompanying stateme	ents) to: Department of the Treasur	y, Internal Revenue Service, Og	gden, UT 84201-0054	