			uctions.

Part Reporting				
Part I Reporting 1 Issuer's name	Issuer		2 Issuer's employer identit	figation number (EIN)
LMV 19H REIT-DC, I	_P		81-4369414	
3 Name of contact for ad	ditional information 4 Tele	phone No. of contact	5 Email address of contact	
GARY CUTSON		212-765-0043	support@a5reit.com	
6 Number and street (or l	P.O. box if mail is not delivered	ed to street address) of contact	7 City, town, or post office, state	e, and ZIP code of contact
	Rockefeller Plaza, Suite 200		New York, NY 10111	
8 Date of action	9	Classification and description		
6/30/2023	Pro	ferred Shares		
10 CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)	
Part II Organizati	onal Action Attach addit	tional statements if needed.	See back of form for additional que	stions.
•			date against which shareholders' owner	•
the action The Iss	suer made distributions in e	excess of its current and accur	nulated earnings and profits as follow	NS:
\$60.00/share on 6/30/20				
15 Describe the quantita	tive effect of the organization	al action on the basis of the sec	urity in the hands of a U.S. taxpayer as	an adjustment per
			sis of the security, to the extent there	
listed in Box 14 above.				
16 Describe the calculat	ion of the change in basis and	d the data that supports the calc	ulation, such as the market values of se	ocurities and the
			and profits were determined under l	RC Section
<u>312, as modified by IRC S</u>	ection 857(d) for a real esta	te investment trust.		
For Donomula Daduction	Ant Nation and the second	to Instructions	Oct. No. 077500	Form 8937 (12-2017)
For Paperwork Reduction	Act Notice, see the separa	te instructions.	Cat. No. 37752P	Form 0337 (12-2017)

Construction of the local division of the lo	01 (12	-2017)					Page 2
art	II	Organizational Action (continued)				
7	ist the	e applicable Internal Revenue Code section	n(s) and subsection(s) upon wh	hich the tax treatment	is hased	•	
		uced under IRC Section 301(c)(2). Any).
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			t				
						······	
			-				
(Can an	y resulting loss be recognized? No					
		·····					
					×		
	rovide	any other information necessary to imple	ment the adjustment such as t	the reportable tax ve	ar 🕨		
F	rovide sis ad	any other information necessary to imple	ment the adjustment, such as ite identified in Box 14 above	the reportable tax yes	ar ►		
F	rovide sis ad	e any other information necessary to imple ljustment is effective on the payment da	ment the adjustment, such as the identified in Box 14 above	the reportable tax yes	ar ►		
P e ba	rovide sis ad	any other information necessary to imple	ment the adjustment, such as tte identified in Box 14 above	the reportable tax ye	ar ►		
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F	rovide sis ad	e any other information necessary to imple	ment the adjustment, such as the identified in Box 14 above	the reportable tax yes	ar ►		
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F ba	rovide sis ad	any other information necessary to imple	ment the adjustment, such as ite identified in Box 14 above	the reportable tax yes	ar >		
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F ba	rovide sis ad	e any other information necessary to imple ljustment is effective on the payment da	ment the adjustment, such as ite identified in Box 14 above	the reportable tax yes	ar ►		
F ba	Unde	pr penalties of perjury, I declare that I have example	nined this return, including accom	panving schedules and	statements	and to the best of n	
	Unde	er penalties of perjury, I declare that I have exar f, it is true, correct, and complete. Declaration of	nined this return, including accom	panving schedules and	statements	and to the best of n	
gn	Unde	er penalties of perjury, I declare that I have exar f, it is true, correct, and complete. Declaration of /s/ Gary A. Cutson for	nined this return, including accom	panying schedules and red on all information of	statements	, and to the best of n arer has any knowled	
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yn	Undebelief	er penalties of perjury, I declare that I have exar f, it is true, correct, and complete. Declaration of /s/ Gary A. Cutson for	nined this return, including accom	panying schedules and ed on all information of Date ►	statements which prep	, and to the best of n arer has any knowled	
gn	Undebelief	er penalties of perjury, I declare that I have exar f, it is true, correct, and complete. Declaration of /s/ Gary A. Cutson for ature ► LMV 19H REIT-DC, LP	nined this return, including accom	panying schedules and ed on all information of Date ►	statements	, and to the best of n arer has any knowleds y 30, 2024	ny knowledge and ge.
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gn ere	Unde belief Signa Print	Pr penalties of perjury, I declare that I have exar f, it is true, correct, and complete. Declaration of /s/ Gary A. Cutson for ature ► LMV 19H REIT-DC, LP your name ► Gary A. Cutson	nined this return, including accom	panying schedules and eed on all information of Date ► Title ►	statements which prep	, and to the best of n arer has any knowleds y 30, 2024	ny knowledge and ge.