

Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

Part I Reporting Issuer

1 Issuer's name FCPM, Inc.		2 Issuer's employer identification number (EIN) 61-1763272	
3 Name of contact for additional information James Finnerty	4 Telephone No. of contact 216-416-3242	5 Email address of contact jamesfinnerty@forestcity.net	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact 50 Public Square, Suite 1410		7 City, town, or post office, state, and Zip code of contact Cleveland, OH 44113	
8 Date of action 12/30/16		9 Classification and description Nontaxable cash distribution to common shareholders	
10 CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)

Part II Organizational Action Attach additional statements if needed. 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 action ▶ The Taxpayer made distributions to its shareholders in excess of its current and accumulated earnings and profits.

See Part II, Line 15 for the amount of these distributions per share.

15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ▶ The distributions reduced basis of the security in the hands of the US Taxpayers as follows:

Date Paid - 12/30/2016

Return of Capital per Share - \$11.10


16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ▶ The Taxpayer's earnings and profits were calculated under IRS Code Section 312, as modified by IRS Code Section 857(d) for a Real Estate Investment Trust and the regulations thereunder. Amounts in excess of the earnings and profits reduced the shareholder's tax basis in its shares to the extent of basis.

Part II Organizational Action (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ §301(c)(2)

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 ▶ _____
The actions are effective on the dates of the distributions identified above.

Sign Here	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.			
	Signature ▶ 	Date ▶ <u>1/26/17</u>		
Paid Preparer Use Only	Print your name ▶ <u>James W Fenwick</u>	Title ▶ <u>SVP-TAX</u>		
	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	Firm's name ▶			Firm's EIN ▶
	Firm's address ▶			Phone no.