Form **8082**

Department of the Treasury

Internal Revenue Service

(Rev. January 2000)

Notice of Inconsistent Treatment or Administrative Adjustment Request (AAR)

(For use by partners, S corporation shareholders, estate and domestic trust beneficiaries, foreign trust owners and beneficiaries, REMIC residual interest holders, and TMPs)

► See separate instructions.

OMB No. 1545-0790

Attachment Sequence No. **84**

Name(s) shown on return Identifying number **General Information** Part I (a)
Notice of inconsistent treatment **(b)** ☐ Administrative adjustment request (AAR) Check boxes that apply: If you are a TMP filing an AAR on behalf of the pass-through entity, are you requesting substituted return ☐ Yes ☐ No treatment? (see instructions) Check applicable box to identify type of pass-through entity: (a) Partnership **(b)** ☐ Electing large partnership (c) \square S corporation (d) \square Estate Identifying number of pass-through entity 6 Tax shelter registration number (if applicable) of pass-through entity Name, address, and ZIP code of pass-through entity 7 Internal Revenue Service Center where pass-through entity filed its return 8 Tax year of pass-through entity Your tax year Inconsistent or Administrative Adjustment Request (AAR) Items (b) Inconsistency is in, (c) Amount as shown on Schedule K-1, Schedule Q, or similar statement, a or AAR is to correct (check boxes that (a) Description of inconsistent or administrative adjustment request (AAR) items (see instructions) (e) Difference between (c) and (d) (d) Amount you are reporting apply) foreign trust statement, or your return, whichever Amount of item Treatment of item applies (see instructions) 11 12

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Part III	Explanations—Enter the Pa your explanations on the b	rt II item ack.	numbe	r before each ex	kplar	nation. If more s	oace	is needed, cont	inue

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Part III	Explanations (continued)	

