89

(December 2011)

Form

Report of Organizational Actions Affecting Basis of Securities

	See	separate	instructions.
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Department of the Treasury Internal Revenue Service		•	See separate instructions.				
Part I Reporting	g Issuer						
1 Issuer's name	-			2 Issuer's employe	er identification number (EIN)		
Northstar Healthcare Income Inc.					27-3663988		
3 Name of contact for additional information 4 Telephone No. of contact			e No. of contact	5 Email address of c	ontact		
Kenneth Bernice			(212) 547-2600				
6 Number and street (c	r P.O. box if mail is not d	7 City, town, or post of	ffice, state, and Zip code of contact				
· · · · · · · · · · · · · · · · · · ·			,				
590 Madison Avenue, 34	l Floor	New York, NY 10022					
8 Date of action		9 Class	ification and description				
See line 15	11 Carial number(a)		n Stock	12 Account number	2)		
10 CUSIP number	11 Serial number(s)		12 Ticker symbol	13 Account number(3)		
66705T 105	N/A		N/A		N/A		
		additional		ee back of form for additio			
				te against which shareholders			
the action ► The	taxpayer made cash dis	stributions t	o its shareholders from its	s current and accumulated e	earnings and profits.		
	the amount of these d						
· · · ·							
	_			rity in the hands of a U.S. taxp			
share or as a perce	ntage of old basis The second seco	e distributio	ons reduced the basis of th	ne securities in the hands of	the U.S. taxpayers		
as mentioned in the a	ttached statement.						
16 Describe the calcul	ation of the change in ba	sis and the c	data that supports the calcu	lation, such as the market val	ues of securities and the		
valuation dates >	-						
- The taxpaver's earnin	as and profits were cal	culated und	er IRC Sec. 312 (as modifi	ed by IRC Sec. 857(d) for			
	· · ·			s of earnings and profits red	uce the		
	· · · · · · · · · · · · · · · · · · ·			ere calculated as of the clos			
				6(a) and Regs. 1.316-1(a)(1)			
			Sonaunoo with into Sec. 31				

Form 893 Part I		. 12-2011) Organiz	ational Action (co	ntinuad)				Pag
Farti		Jiganiz		(intinueu)				
				le section(s) and subsection(s) upor	which the tax t	reatment	is based ►
Interr	nal Re	venue Co	ode Section 301(C)(2)					
			loss be recognized? ►		201()(C)			
No; n	ion-ta:	xable trea	atment governed by IF	RC Sectio	n 301(c)(2).			
					nent the adjustment, such stributions identified abo		le tax yea	ar 🕨
These	e actio	ons are e	nective on the date(s)	or the dis	stributions identified abo	ove.		
	Unde	r penalties	of perjury, I declare that I	have exam	ined this return, including ac	companying sche	dules and s	statements, and to the best of my knowledge
Sign	Deller	, 11 13 11 100, 1					mation of t	which preparer has any knowledge.
Here	Signa	iture 🕨	kenneth Ben	na			Date 🕨	1/31/2020
			0B9806BC6A89475				Duto P	
	Print		Kenneth Bernice		-			Senior Director of Tax
Paid		Print/Typ	e preparer's name		Preparer's signature		Date	
Prepa		Eirme ¹ e						self-employed
Use C	Jnly	Firm's na	me ► dress ►					Firm's EIN ► Phone no.

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054

Northstar Healthcare Income Inc. Form 8937 2019 Tax Year

Part II, Line 15:

Per Share Reduction of Basis

	Distribution Date	Distribution Per Share Per Day	Per Share Per Day Reduction of Basis	Return of Capital Percentage	
Common Stock	1/1/2019	0.000924658	0.000924658	100.000%	
Common Stock	2/1/2019	0.000924658	0.000924658	100.000%	