(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 I Reporting	Issuer					
1 Issuer's name				2 Issuer's employer identification number (EIN)		
NAVIOS MARITIME MIDST		98-1201616				
3 Name of contact for additional information 4 Telephone No. of contact			5 Email address of contact			
EDICILI TOIDONI			ETOLOGUE AL LUCA COLL			
ERIFILI TSIRONI 6 Number and street (or F	O hov if mail is not	dalivered to s	+30-210-4595000	TSIRONI@NAVIOS.COM 7 City, town, or post office, state, and ZIP code of contact		
o realises and street (or r	.0. 00%	delivered to s	street address) of contact	7 Gity, town, or post office, state, and ZIP code of confact		
7 AVENUE DE GRANDE BI	RETAGNE OFFICE 1	11B2		MONTE CARLO, MC 98000 MONACO		
8 Date of action	ite mone, or not		sification and description	MONTE GARLES, MO 30000 MONAGO		
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				S AS OF DECEMBER 31, 2017. THE ISSUER ALSO		
				CORDINGLY, NONE OF THE DISTRIBUTIONS MADE BY		
				ABLE DIVIDEND. HOLDERS OF THE ISSUER'S		
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Cat. No. 37752P

Under penalties of perjury, I deplare 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. Date > 03 01 2019 Signature > Print your name ► ERIFILI TSIRONI Title ▶ CHIEF FINANCIAL OFFICER Date Print/Type preparer's name Check ____ if 02/28/2019 self-employed MOSHE LANDY P00443857 Preparer ▶ MARKS PANETH LLP Firm's EIN ▶ Firm's name 11-3518842 **Use Only** Firm's address ▶ 685 THIRD AVENUE, NEW YORK, NY 10017 212.503.8800 Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054

Sign

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(December 2017)
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Internal Revenue Service

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ERIFILI TSIRONI			+30-210-4595000	ETSIRONI@NAVIOS.COM		
6 Number and street (or P	.O. box if mail is not	7 City, town, or post office, state, and ZIP code of contact				
7 AVENUE DE GRANDE BE	RETAGNE, OFFICE			MONTE CARLO, MC 98000 MONACO		
8 Date of action		9 Class	ification and description			
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Form 8	3937 (12-	2017)	Page 2
Par	t II	Organizational Action (continued)	
17	List the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶	IRC §§301(c) AND 316(a).
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		HE DATE OF DISTRIBUTION TO WHICH THIS FORM RELATES. A UNITHOLDER MAY RECOGNIZE TO	
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	Unde	r penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and , it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer h	I to the best of my knowledge and has any knowledge.
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ANTONIO POR PORTO DE LA CONTRACTOR DE LA	Signa	ture Date Date Date	1401
	Print	your name ▶ ERIFILI TSIRONI . Title ▶ CHIEF FINAN	ICIAL OFFICER
Paic		Print/Type preparer's name Preparer's signature Date Ch	eck if PTIN
	arer		f-employed P00443857
	Only		m's EIN ▶ 11-3518842
		Firm's address > 605 THIDD AVENUE NEW YORK NV 10017	212 502 0000

Firm's address ▶ 685 THIRD AVENUE, NEW YORK, NY 10017

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

Phone no.

212.503.8800

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ERIFILI TSIRONI +30-210-4595000 E				ETSIRONI@NAVIOS.COM			
6 Number and street (or P.O. b	oox if mail is not o	delivered to s			7 City, town, or post office, state, and ZIP code of contact		
7 AVENUE DE GRANDE BRETA	AGNE, OFFICE 1				MONTE CARLO, MC 98000 MONACO		
8 Date of action		9 Class	sification and description				
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	BLE LOSS TO ANY UNITHOLDER. UNITHOLDERS SHOULD CONSULT THEIR TAX ADVISORS TO DETER	
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	belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer	arer has any knowledge.
Sign	021	2112-10
Here	Signature ► Date ► 03	0112019
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	Print your name ► ERIFILI TSIRONI Title ► CHIEF FIN	NANCIAL OFFICER
Paid	Print/Type preparer's name Preparer's signature Date	Check if PTIN
Prepa	arer MOSHE LANDY VIllosto Fledy 02/28/2019	self-employed P00443857
Use (Firm's EIN ▶ 11-3518842
	Firm's address ► 685 THIRD AVENUE, NEW YORK, NY 10017	Phone no. 212.503.8800
Send Fo	orm 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogo	den. UT 84201-0054

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	Prin	your name ► ERIFILI TSIRONI	Title ► CHIEF FIN	IANCIAL OFF	ICFR
Paid		Print/Type preparer's name Preparer's signature	Date	Check if	PTIN
Prep		MOSHE LANDY / Medy	02/28/2019	self-employed	P00443857
	Only	Firm's name MARKS PANETH LLP		Firm's EIN ▶	11-3518842
Sand I	Form 8	Firm's address ► 685 THIRD AVENUE, NEW YORK, NY 10017 337 (including accompanying statements) to: Department of the Treasury, Internal Re	venue Senice Occ	Phone no.	212.503.8800