Form **8937**(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	ssuer							
1 Issuer's name				:	2 Issuer's employer identification number (EIN)			
Kayne Anderson MLP Inve								
3 Name of contact for additional information 4 Telephone No. of contact					5 Email address of contact			
Terry Hart 1-877-657-3863					CEF@kaynecapital.com			
6 Number and street (or P.O. box if mail is not delivered to street address) of contact					7 City, town, or post office, state, and ZIP code of contact			
811 Main Street, 14th Floor		н	ouston, TX 77002					
8 Date of action								
See below		Commor						
10 CUSIP number	11 Serial number((s)	12 Ticker symbol	1:	3 Account number(s)			
486606106			KYN					
					of form for additional questions.			
					t which shareholders' ownership is measured for			
					mmon shareholders during 2017 that were			
	ole upon computati	on of KYN's	earnings and profits after	the tax ye	ear-end. See Part II, Line 15 for the amount of			
distributions per share.								
-								
								
					w1.0			
					hands of a U.S. taxpayer as an adjustment per			
	ige of old basis ► A	shareholder ¹	s basis in KYN stock is re	educed by	the nontaxable distributions paid per share			
as follows:	STATISTICS OF THE STATE OF THE	v81 5234						
\$0.3956 with a record date								
\$0.3237 with a record date								
\$0.3237 with a record date of 07/10/2017 payable 07/14/2017								
\$0.3237 with a record date	of 10/09/2017 paya	ble 10/13/201	7 /	_				
					ch as the market values of securities and the			
					12, and the regulations thereunder. Amounts in			
excess of earnings and pro	ofits reduce the sha	areholder's ta	x basis in its shares to th	ne extent o	of basis.			

Part I		Organizational Action (continue	ed)			
17 Lis	st the	applicable Internal Revenue Code secti	on(s) and subsection(s) upon	which the tax treatment is based	Tax Treatment is based	
upon In	ternal	Revenue Code Section 301 (c) and 3	16 (a).			
18 Ca	an any	resulting loss be recognized? ► No.				
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	_					
19 Pr	rovido	any other information necessary to imp	lement the adjustment such	as the reportable tay year > The	ass actions are offective on the	
		ibution identified above.	nement the adjustment, such	as the reportable tax year > 1116	ese actions are effective of the	
uates 0	uisu	ibution identified above.				
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-		The second				
-	Unde	r penalties of perjury, I declare that I have e	xamined this return, including acc	companying schedules and statemen	nts, 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 pre	eparer has any knowledge.	
Sign			11/-	naria =	3 (0	
Here Signature ▶ Date ▶ 1291/8						
	Joigina	The state of the s		- Julio - 17 2	1100	
	Print	your name ► Terry A. Hart		Title ► Chief F	inancial Officer and Treasurer	
Delet	1	Print/Type preparer's name	Preparer's signature	Date	Check if PTIN	
Paid					self-employed	
Preparer		Firm's name			Firm's EIN ▶	
Use C	JIIIY	Firm's address			Phone no.	
015	00	27 /including accompanying statement	a) to Donostroont of the Trees	our Internal Payanue Service C		