(December 2011)

Report of Organizational Actions Affecting Basis of Securities

Corrected

OMB No. 1545-2224

Department of the Treasury Internal Revenue Service			► See separate instructions.	Corrected	
Part I Reportin	g Issuer				fals, other dispuss f
1 Issuer's name				2 Issuer's employer identifi	cation number (EIN)
iSharos International De	walanad Property ETE			26-025860	67
iShares International Developed Property ETF 3 Name of contact for additional information 4		4 Telephor	ne No. of contact	5 Email address of contact	
BlackRock Fund Advisors			1-800-474-2737	isharesetfs@blackrock.com	
6 Number and street (c	or P.O. box if mail is not o	lelivered to	street address) of contact	7 City, town, or post office, state	, and Zip code of contact
c/o BlackRock Inc., 1 Ur	niversity Square DR			Princeton, NJ 08540	
8 Date of action			sification and description		
03/31/2017 10 CUSIP number	11 Serial number(s)		n Stock - Regulated Investmental 12 Ticker symbol	ent Company 13 Account number(s)	51
10 COSIF humber	Serial flumber(s)		12 Hoker Symbol	10 Account number(a)	
464288422	and the second		WPS	e back of form for additional ques	
				y in the hands of a U.S. taxpayer as	
			able return of capital is as fo	utes a non-taxable return of capital illows:	will decrease a
			Reduction of		
Distribution Payable Or		Basis in Co \$0.034664	mmon Stock		
March 30, 2017					
valuation dates ▶ 1	ssuer's current and acc return of capital represe	cumulated e	earnings were compared to do nount of distributions paid du	tion, such as the market values of se listributions paid during the year e uring the taxable year ended March	nded March 31,
					A septiment Set I
	Personal Personal		*		

	' (Rev. 12-2011)	Designation of Australia State Consideration	Page 2
Part II	Organizational Action (continued)		
17 List	t the applicable Internal Revenue Code section(s) and su	bsection(s) upon which the tax treatment is	based ►
Internal F	Revenue Code Sections 301, 316, 852.		wateral prospersion Cl 1891
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18 Can	n any resulting loss be recognized? ► No		
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19 Prov	vide any other information necessary to implement the a	diretment such as the reportable tay year	Master to Angele and Messelland on and April
	II, Item 15 of this form for the per share amounts and		
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1	Under penalties of perjury, I declare that I have examined this re- pelief, it is true, correct, and complete. Declaration of preparer (o	turn, including accompanying schedules and state	ements, and to the best of my knowledge and
	ositor, it is true, correct, the complete, becaute attent of preparer (c	indicate officer) is begoed on an information of wish	cii preparer has any knowledge.
Sign	198		111110
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Paid	Print/Type preparer's name Preparer's	signature Date	Check if PTIN
Prepare	er		self-employed
Use On			Firm's EIN ▶
	Firm's address ►		Phone no.
Send Form	n 8937 (including accompanying statements) to: Departr	nent of the Treasury, Internal Revenue Service	