► See separate instructions.

	Issuer's name	155001				2 Issuer's employer identification number (EIN)
Pro	Shares UltraShort S&F	P500				20-3836953
3	Name of contact for ad	ditional information	5 Email address of contact			
Ed I	Karpowicz		ekarpowicz@proshares.com			
	Number and street (or F	P.O. box if mail is not	7 City, town, or post office, state, and ZIP code of contact			
750	1 Wisconsin Avenue, S	Suite 1000E	Bethesda, MD 20814			
8 Date of action 9 Classification and description						
	31/20	1		Common	Stock- Regulated Investme	
10	CUSIP number 11 Serial number(s)		(s)	12 Ticker symbol		13 Account number(s)
	74347B383	N/A			SDS	N/A
Pa			ch a	dditional		e back of form for additional questions.
14	÷					against which shareholders' ownership is measured for
						o common shareholders during the taxable year ended
Oct					a non-taxable return of capi	
					· · · · · · · · · · · · · · · · · · ·	
15	Describe the quantita	tive effect of the orga	aniza	ational acti	ion on the basis of the securi	y in the hands of a U.S. taxpayer as an adjustment per
	share or as a percenta	age of old basis \blacktriangleright T	he p	ortion of	the distribution that constit	utes a non-taxable return of capital will decrease a
U.S						return of capital is as follows:
						· · · · ·
					Per Share Reduct	
	tribution on Ex- Date:		Stock			
Ma	rch 25, 2020				\$0.056881	
16		-				tion, such as the market values of securities and the
						ngs were compared to distributions paid during the year
						stributions paid during the taxable year ended
Oct	ober 31, 2020 in exces	s of ProShares Ultr	aSh	ort S&P50	00's current and accumulate	d earnings and profits under IRC Section 316.

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Part		Organizational Action (continued)		·
17 Li	st the	applicable Internal Revenue Code section(s) and subsection(s)	pon which the tax treatment is based \blacktriangleright	
		nue Code Sections 301, 316, 852.	·	
18 C	an any	resulting loss be recognized? ► No.		
		any other information necessary to implement the adjustment		
		em 15 of this form for the per share amounts and dates of o		nal action.
Inis or	ganiza	ational action is reportable with respect to calendar year 20	0.	
	Unde	r penalties of perjury, I declare that I have examined this return, includ , it is true, correct, and complete. Declaration of preparer (other than of	g accompanying schedules and statements, an	d to the best of my knowledge and
Sign	Deller			has any knowledge.
Sign Here	0:	ZARY	Date ► 3.29.2021	
	Signa	iture >	Date ► _3.29.2021	
	Print	your name ► Troy Sheets	Title► Treasurer	
Paid		Print/Type preparer's name Preparer's signature	Date	heck if PTIN
Prepa	arer		se	lf-employed
Use C		Firm's name		rm's EIN ►
		Firm's address ►	PI	none no.

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