

## Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

**Part I Reporting Issuer**

<b>1</b> Issuer's name		<b>2</b> Issuer's employer identification number (EIN)	
ProShares Morningstar Alternatives Solution ETF		47-1806743	
<b>3</b> Name of contact for additional information	<b>4</b> Telephone No. of contact	<b>5</b> Email address of contact	
Ed Karpowicz	240-497-6487	ekarpowicz@proshares.com	
<b>6</b> Number and street (or P.O. box if mail is not delivered to street address) of contact		<b>7</b> City, town, or post office, state, and Zip code of contact	
7501 Wisconsin Avenue, Suite 1000E		Bethesda, MD 20814	
<b>8</b> Date of action		<b>9</b> Classification and description	
12/31/16		Common Stock - Regulated Investment Company	
<b>10</b> CUSIP number	<b>11</b> Serial number(s)	<b>12</b> Ticker symbol	<b>13</b> Account number(s)
74347B813	N/A	ALTS	N/A

**Part II Organizational Action** Attach additional statements if needed. See back of form for additional questions.

**14** Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ▶ **ProShares Morningstar Alternatives Solution ETF paid quarterly distributions to common shareholders during the calendar year 2016. A portion of four of these distributions constitutes a non-taxable return of capital.**

**15** Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ▶ **The portion of these distributions that constitutes a non-taxable return of capital will decrease a U.S. taxpayer's basis in the shares of ProShares Morningstar Alternatives Solution ETF. The non-taxable return of capital is as follows:**

Distribution on Ex-Date:	Per Share Reduction of Basis in Common Stock
April 01, 2016	\$0.002141
July 01, 2016	\$0.003458
October 03, 2016	\$0.004961
December 23, 2016	\$0.004365

**16** Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ▶ **ProShares Morningstar Alternatives Solution ETF's current and accumulated earnings were compared to distributions paid during the calendar year 2016. The non-taxable return of capital represents the amount of distributions paid during the calendar year in excess of ProShares Morningstar Alternatives Solution ETF's current and accumulated earnings and profits under IRC Section 316.**

**Part II Organizational Action** (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶  
**Internal Revenue Code Sections 301, 316, 852.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18 Can any resulting loss be recognized? ▶ **No.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶  
**See Part II, Item 15 of this form for the per share amounts and dates of distributions impacted by this organizational action.**  
**This organizational action is reportable with respect to calendar year 2016.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Sign Here**  
Under penalties of perjury, I declare 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.  
Signature ▶ *Charles S. Todd* Date ▶ July 26, 2017  
Print your name ▶ **Charles S. Todd** Title ▶ **Treasurer**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no.			