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 I	ssuer			
1 Issuer's name		2 Issuer's employer identification number (EIN)		
The Options Clearing Corp	oration			36-2756407
3 Name of contact for add		4 Telephon	e No. of contact	5 Email address of contact
Thomas Crider			312.322.6200	Form8937@theocc.com
6 Number and street (or P	.O. box if mail is not o	7 City, town, or post office, state, and ZIP code of contact		
125 S. Franklin Street Suite	2 1200			Chicago, IL 60606
8 Date of action		9 Class	sification and description	10ougo, 12 00000
October 11, 2024		Ontions	on shares of Schwab U.S. Aggre	gate Bond FTF
10 CUSIP number	11 Serial number(s)		12 Ticker symbol	13 Account number(s)
The second secon	All series		SCHZ	
Part II Organization				ck of form for additional questions.
				inst which shareholders' ownership is measured for
				Bond ETF (SCHZ) is replaced by 2
contracts to reflect a 2 for				
,——————————————————————————————————————				
				he hands of a U.S. taxpayer as an adjustment per ocated to each of the 2 replacement contracts.

			data that supports the calculation, ocated proportionately across the	such as the market values of securities and the ne replacement contracts.
		4		

Par	t III	Organizational Action (continu	ed)						
17	List th	e applicable Internal Revenue Code sec	tion(s) and subsection(s) upon wh	nich the tax treatment is based	► <u>Section 1012 (a)</u>				
				0-161					
					_				
18	Can ar	ny resulting loss be recognized? ► No.							
				ROLL CONTRACTOR OF THE PARTY OF					
-									
0									
19	Provid	e any other information necessary to im-	olement the adjustment, such as	the reportable tax year ▶					
		,	•						
		2							
	T								
	Und	der penalties of perjury, I declare that I have e ef, it is true, correct, and complete. Declaration	examined this return, including accome on of preparer (other than officer) is bas	panying schedules and statement sed on all information of which pres	s, and to the best of my knowledge and parer has any knowledge.				
Sign		elief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.							
Here		. /							
ricic	Sign	Signature Date 10/29/2024							
	Prin	t your name ► Thomas Crider	I		re Director				
Paic	l	Print/Type preparer's name	Preparer's signature	Date	Check if PTIN				
	arer	•			self-employed				
	Only				Firm's EIN ▶				
		Firm's address ▶			Phone no.				
Send	Form 8	3937 (including accompanying statement	s) to: Department of the Treasury	 Internal Revenue Service. Od 	iden. UT 84201-0054				