Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service			► See separate instructions.			
Part I Reporting	Issuer					
1 Issuer's name				2 Issuer's employer identi	fication number (EIN)	
SPDR MSCI ACWI ex-US I	ETF			83-04635	48	
			e No. of contact	5 Email address of contact		
SSGA Funds Management, Inc. 1-866-787-2257				Fund_Inquiry@SSgA.com		
6 Number and street (or I			7 City, town, or post office, state, and ZIP code of contact			
One Iron Street		Boston, MA 02210-1641	Boston, MA 02210-1641			
8 Date of action		·				
September 23, 2019						
10 CUSIP number	11 Serial number(s)	3:2 Shar	12 Ticker symbol	13 Account number(s)		
	(4)		II //one/ symbol	, tessam names (e)		
78463X848	N/A		CWI	N/A		
Part II Organizati	onal Action Attach	additiona	statements if needed. S	ee back of form for additional que	stions.	
				te against which shareholders' owner	ship is measured for	
the action ► Effective	ve, September 23, 2019	, the Fund	d underwent a 3 for 2 share	e split.		
-						
	2			<u> </u>		
		-				
		·				
15 Describe the quantita	tive offect of the exacting	ational act	ion on the book of the accur	rity in the hands of a U.S. taxpayer as	an adimeter at a co	
				ch post-split has a tax basis equal to		
basis of a pre-split share.	upor	1 errective	date of the share split, each	ch post-spiit has a tax basis equal to	o two-thirds of the tax	
basis of a pre-split strate.						
			12.74			
16 Describe the calculati	on of the change in basi	s and the	data that supports the calcu	lation, such as the market values of se	ecurities and the	
valuation dates ► The	basis of each share o	f the Fund	l held by a shareholder afte	er the share split is two-third of the	basis before the	
share split, however, the s						

Pai	rt II	Organizational Action (cor	ntinued)		r age a
17	List t		e section(s) and subsection(s) upon wh	ich the tax treatment is based	IRC 358(b)(1), 368, and 354
18	Can	any resulting loss be recognized? ▶	No		
				·	
19 with t year.	Provi their	de any other information necessary t Tax Advisor to determine the impa	o implement the adjustment, such as too tof this transaction with respect to	he reportable tax year ► Fund their individual facts and circ	shareholders should consult cumstances for the 2019 tax
	Un	nder penalties of perjury, I declare that I h lief, it is true, correct, and complete. Decla	ave examined this return, including accomparation of preparer (other than officer) is base	panying schedules and statements ed on all information of which prepa	and to the best of my knowledge and arer has any knowledge.
Sign Here	.	gnature • Ueu Au	£	Date ▶	05/19
	Pri	int your name ► Darlene Anderson-V	asquez	Title ► Deputy T	reasurer
Paic Pres		Print/Type preparer's name	Preparer's signature	Date	Check if self-employed PTIN
Use	Onl	y Firm's name ▶			Firm's EIN ▶
		Firm's address ▶	ments) to: Department of the Treasury	LI ID C	Phone no.
sena	rorm	obot uncluding accompanying state	TIEDIS) TO: Department of the Treasury	Internal Revenue Service Occ	ten III 8/201_005/