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	Issuer							
1 Issuer's name					2 Issuer's employer identification number (EIN)			
SPDR S&P 400 Mid Cap G	rowth ETE	14-1937151						
3 Name of contact for add			5 Email address of contact					
			ne No. of contact					
SSGA Funds Management, Inc. 1-866-787-2257					Fund_Inquiry@SSgA.com			
6 Number and street (or P.O. box if mail is not delivered to street address) of contact					7 City, town, or post office, state, and ZIP code of contact			
					Doctor MA 02210 1041			
One Iron Street 8 Date of action			Boston, MA 02210-1641					
			sification and description					
June 13, 2018	,	3:1 Shar						
10 CUSIP number	11 Serial number(s)	12 Ticker symbol		13 Account number(s)			
704044004			MDVC		N/A			
78464A821 Part II Organization	N/A Onal Action Attac	h additiona	MDYG I statements if needed.	See bac	N/A k of form for additional questions.			
					nst which shareholders' ownership is measured for			
the action ► Effective	re, June 13, 2018, th	e Fund unde	erwent a 3 for 1 share spl	lit.				
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			W-701-4-1					
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15 Describe the quantitat	ive effect of the orga	nizational act	ion on the basis of the sec	curity in th	e hands of a U.S. taxpayer as an adjustment per			
share or as a percentage of old basis > Upon effective date of the share split, each post-split has a tax basis equal to one-third of the tax basis of a pre-split share.								
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					4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
	-				uch as the market values of securities and the			
				after the sl	hare split is one-third of the basis before the			
share split, however the sh	nareholder's total in	vestment ba	sis remains the same.					
A		4						
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Part	Щ	Organizational Action (continu	ed)		
17 L	₋ist the	applicable Internal Revenue Code sec	tion(s) and subsection(s) upon which the ta	x treatment is based	► IRC 358, 368 and 354
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			· Accessory and accessory accessory and accessory and accessory and accessory accessory and accessory accessory and accessory accessory and accessory accessory accessory and accessory access		
		·			
18 C	Can anv	resulting loss be recognized? ► No			
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				WHAT	· · · · · · · · · · · · · · · · · · ·
			olement the adjustment, such as the report this transaction with respect to their ind	•	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
					The state of the s
			examined this return, including accompanying sc		
	belief	, it is true, correct, and complete. Declaratio	n of preparer (other than officer) is based on all in	formation of which prepa	arer has any knowledge.
Sign Here	Signa	iture V Lluf		Date ► _ 4//	4/18
	Deint -	vour name > Darlone Anderson Vess		Title ► Deputy T	roscuror
Paid	T LUDE,	your name ► Darlene Anderson-Vasqu Print/Type preparer's name	Preparer's signature	Title ► Deputy T Date	Check if PTIN
Paid Prepa	arer				self-employed
Use (Firm's name			Firm's EIN ▶
		Firm's address ►	ts) to: Department of the Treasury Internal	Dovonuo Candos O-	Phone no.