## Form **8937**(December 2011) Department of the Treasury Internal Revenue Service

## Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-2224

► See separate instructions.

	1 Issuer's name			
JOEDG DIVEDGIEIED I	34-1723097 5 Email address of contact			
3 Name of contact for additional information 4 Tele				
		216-755-5500	CSCHULTZ@DDR.COM	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact 3300 ENTERPRISE PARKWAY, ATTN: TAX DEPARTMENT			7 City, town, or post office, state, and Zip code of contact  BEACHWOOD, OH 44122	
11 Serial number(s)		12 Ticker symbol	13 Account number(s)	
		DDB		
onal Action Attach	additional	J	back of form for additional questions.	
	DISTRIBU	TIONS REDUCED THE BASIS	OF THE SECURITY IN THE HANDS OF THE UNITED	
CUSIP N	10.	RETURN OF CA	APITAL PER SHARE	
2515911	03	.02		
2515911	03	.04		
2515911	03	.04		
23317H	102	.06		
E TAXPAYER'S EARN EAL ESTATE INVEST	INGS AND MENT TRUS	PROFITS WERE CALCULATE	D UNDER IRC SECTION 312, AS MODIFIED BY IRC THEREUNDER. AMOUNTS IN EXCESS OF EARNINGS	
	ative effect of the organizage of old basis ► THE  CUSIP N  2515911  2515911  23317H:  Ion of the change in base  E TAXPAYER'S EARN	COMMO  11 Serial number(s)  ional Action Attach additional attional action and, if applicable, the AXPAYER MADE CASH DISTRIBUTED IN THE DISTRIBUT	P.O. box if mail is not delivered to street address) of contact  WAY, ATTN: TAX DEPARTMENT  9 Classification and description  COMMON  11 Serial number(s)  12 Ticker symbol  DDR  ional Action Attach additional statements if needed. See ational action and, if applicable, the date of the action or the date at AXPAYER MADE CASH DISTRIBUTIONS TO ITS SHAREHOLDE GS AND PROFITS. SEE PART II, LINE 15 FOR THE AMOUNT OF CASH OF C	

Part		Organizational Action (continued)	
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶	IRC SECTION 301(C)(2)
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18	Can an	resulting loss be recognized? ► NO	
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			Service Metro Leader
	444		
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enteres.			
			4-3-00-00
•		7/202	
19	Provide	any other information necessary to implement the adjustment, such as the reportable tax year $ ightharpoonup$ THESE	ACTIONS ARE EFFECTIVE
		ES OF DISTRIBUTIONS IDENTIFIED ABOVE.	
_		The state of the s	
_			
			22.00
	Unde	penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, a	nd 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 prepare	er has any knowledge.
Sign		1.000	
Here	Signa	ture \ ( \tage \) Schus Date \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	13/12
	Print	rour name ► CRAIG A. SCHULTZ Title ► SR VP OF	TAX & STRATEGIC FINANCE
Paid		Print/Type preparer's name Preparer's signature Date	Check T if PTIN
Prepare			self-employed P00021417
	Only	Firm's name ► PRICEWATERHOUSECOOPERS LLP	Firm's EIN ▶ 13-4008324
	-···y	Firm's address ➤ 200 PUBLIC SQUARE, SUITE 1800, CLEVELAND, OH 44114-2301	Phone no. 216-875-3000
Cond I		37 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Odds	D LIT 94901 0054