Form **8937**

(December 2011) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-2224

Part I Reporting Issuer					
1 Issuer's name	2 Issuer's employer identification number (EIN)				
Washington Prime Group, Inc.		46-4323686			
3 Name of contact for additional information	4 Telephone No. of contact	5 Email address of contact			
John Mills	614-621-9000	john.mills@washingtonprime.com			
6 Number and street (or P.O. box if mail is not	7 City, town, or post office, state, and Zip code of contact				
180 East Broad Street	O Ole - Me - Me - A de - de Me	Columbus, OH 43215			
8 Date of action	9 Classification and description				
Various see 14 below	Common Stock				
10 CUSIP number 11 Serial number(s	And the state of t	13 Account number(s)			
	,	To Trooball Hornbox(b)			
See 15 below					
	h additional statements if needed. See	back of form for additional questions.			
		against which shareholders' ownership is measured for			
the action ► Distributions in excess of e	earnings and profits were made on the fo	llowing dates:			
March 15, 2016 (record date March 07, 2016);					
September 22, 2016 (record date September 0	9, 2015) and December 15, 2016 (record of	date December 02, 2015).			
47 Dec 16 11 11 11 11 11 11 11 11 11 11 11 11					
-	nizational action on the basis of the securit	y in the hands of a U.S. taxpayer as an adjustment per			
share or as a percentage of old basis					
CUSIP 92939N102: March 15, 2016: Distribution					
CUSIP 93964W108: September 22, 2016: Distributions	s per share \$0.250000; Return of Capital				
	utions per share \$0,250000; Return of Ca				
December 15, 2016: Distrib	utions per share 30/230000; Return of Ca	pital per share \$0.074306			
16 Describe the calculation of the change in b	asis and the data that supports the calcula	tion, such as the market values of securities and the			
		nst and reduce the adjusted basis of stock.			

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art II			nal Action (con	tinued)					1 490
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LIS: ction :		ipplicable inter	nai Hevenue Code	section(s	s) and subsection(s) upon v	mich the tax trea	iti i lei i t	is Dased i	
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Ca	ın any	resulting loss	be recognized? ▶	мот арр	ncable				
		th as lafe.			nent the adjustment, such a	a the reportable	tov va	or b	
Pr	OVIGE	any other intor	mation necessary t	o impien	ient the adjustment, such a	is the reportable	tax yo		
_									
	Under	r penalties of pe	rjury, I declare that I	neve exem	ilned this return, including acc preparer (other than officer) is	ompanying schedu	les and	statement	s, and to the best of my knowledge a
an l	Dellet	r, it is true, correc	x, and complete. Dec	aration of	preparer (other than officer) is	DESCU ON AN INION	iation o	Willon pro	parer has any knowledge.
gn ere	Signe	ature ►	20	5.	2		Date ►	2	2/13/17
	Jigna								
	Print	your name ► M			Desperate almost an		Title >	CFO	PTINI
aid		Print/Type pre	oarer's name		Preparer's signature		Date		Check If self-employed
repa		Firm's name	>						Firm's EIN ▶
se C	חווא	Firm's address							Phone no.
compared to the second		Manager eminage and							oden LIT 84201-0054

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054