## (December 2011) Department of the Treasury

## **Report of Organizational Actions Affecting Basis of Securities**

▶ See separate instructions.

OMB No. 1545-2224

Internal Revenue Service Reporting Issuer Part I 2 Issuer's employer identification number (EIN) 1 Issuer's name Stone Ridge Reinsurance Risk Premium Fund 46-1663780 3 Name of contact for additional information Telephone No. of contact 5 Email address of contact Patrick Kelly info@stoneridgeam.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 510 Madison Avenue, 21st Floor New York, NY 10022 8 Date of action 9 Classification and description 12/01/2016 Nontaxable Return of Capital 10 CUSIP number 11 Serial number(s) 12 Ticker symbol 13 Account number(s) See Statement 1 See Statement 1 Organizational Action Attach additional statements if needed. See back of form for additional guestions. Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► Stone Ridge Reinsurance Risk Premium Fund paid a nontaxable return of capital distribution on the dates listed on Statement 1 to the shareholders of record on the dates listed on Statement 1. A portion of each distribution constitutes a non-taxable return of capital. Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis The portion of the distribution that constitutes a non-taxable return of capital will decrease a U.S. taxpayer's basis in the shares of the Issuer. See Statement 1 for per share of the non-taxable return of capital. Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► The basis of the shareholders of record for each dividend is lowered by the per share amount listed on Statement 1. The rate was determined in accordance to IRC §301 and §316.

Part I	U (	<b>Organizational Action</b> (continue	ed)				
<b>17</b> Li:	st the	applicable Internal Revenue Code secti	on(s) and subsection(s) upon w	hich the tax tr	eatment is based	•	
Internal	Reve	enue Code Sections 301(c)(2), 316(b)(4	4), and 852(c)(3).				
		resulting loss be recognized? ► No Id	oss can be recognized by the	shareholders	of record for the	e nontaxable return of capital	
distribu	tion r	eceived.					
		any other information necessary to impon the shareholder's 2016 1099-DIV st		s the reportabl	e tax year ▶ <u>The i</u>	nformation provided above will	
	Unde	r penalties of perjury, I declare that I have ex	camined this return, including accor	mnanving sched	ules and statements	and to the best of my knowledge, and	
		f, it is true, correct, and complete. Declaration					
Sign							
Here	Ciana	ature ► Signed Copy Maintained by	Taypayar		Data N 01	/12/2017	
	Signa	dure Signed Copy Maintained by	Тахраусі		Date ►01	712/2017	
Paid	Print	your name ► /s/ Patrick Kelly Print/Type preparer's name	Preparer's signature		Title ► Chief Ope	erating Officer and Treasurer  Check if PTIN	
Prepa						self-employed	
Use C	nly	Firm's name				Firm's EIN ▶	
		Firm's address	o) to: Department of the Tre	m. Internal D	vonue Camilla C	Phone no.	
Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054							

Date of Action: 12/01/16

Attachment for Form 8937, Report of Organizational Actions Affecting Basis of Securities

	Part I, Line 10	Part I, Line 12	Part II, Line 14	Part II, Line 14	Part II, Line 14	Part II, Line 15	
Issuer's Name and EIN C		<u>CUSIP</u>	Ticker Symbol	Record Date	Ex-Dividend Date	Payable Date	Nondividend Distributions
Reinsurance Risk Premium Fund (46-1663780)	1	861728103	SREIX	11/30/2016	12/1/2016	12/1/2016	\$ 0.01159238
Reinsurance Risk Premium Fund (46-1663780)	М	861728202	SREMX	11/30/2016	12/1/2016	12/1/2016	\$ 0.01146611