

### Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

**Part I Reporting Issuer**

1 Issuer's name		2 Issuer's employer identification number (EIN)	
IQ U.S. REAL ESTATE SMALL CAP ETF		45-2218149	
3 Name of contact for additional information	4 Telephone No. of contact	5 Email address of contact	
ADEFOLAHAN OYEFESO	(914) 697-4904	AOYEFESO@INDEXIQ.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	
800 WESTCHESTER AVE. SUITE S-710		RYE BROOK, NY 10573	
8 Date of action	9 Classification and description		
06/30/2015, 09/30/2015, 01/05/2016, 03/30/2016	SHARES - REGULATED INVESTMENT COMPANY		
10 CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)
45409B628	N/A	ROOF	N/A

**Part II Organizational Action** Attach additional statements if needed. See back of form for additional questions.

14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ▶ THE FUND PAID DISTRIBUTIONS TO SHAREHOLDERS IN JUNE AND SEPTEMBER OF 2015 IN ADDITION TO JANUARY AND MARCH OF 2016. A PORTION OF THOSE DISTRIBUTIONS CONSTITUTE NON-TAXABLE RETURN OF CAPITAL.

15 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 BASIS OF THE SECURITY SHOULD BE REDUCED BY 39.48% OF THE TOTAL DISTRIBUTIONS RECEIVED IN JUNE AND SEPTEMBER OF 2015 IN ADDITION TO JANUARY OF 2016. THE BASIS OF THE SECURITY SHOULD ALSO BE REDUCED BY 34.59% OF THE TOTAL DISTRIBUTION RECEIVED IN MARCH OF 2016.

16 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 NON-DIVIDEND DISTRIBUTIONS REPRESENT DISTRIBUTIONS ASSOCIATED WITH THE 2015 FUND TAX YEAR WHICH ARE IN EXCESS OF THE CURRENT YEAR AND ACCUMULATED EARNINGS AND PROFITS.

**Part II Organizational Action** (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ I.R.C. SECTIONS 301(c)(2) AND 317(a).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18 Can any resulting loss be recognized? ▶ N/A

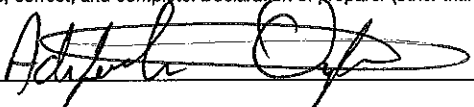
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ N/A

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and 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 preparer has any knowledge.

**Sign Here**

Signature ▶ 

Date ▶ 7/15/2016

Print your name ▶ ADEFOLAHAN OYEFESO

Title ▶ VICE PRESIDENT

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no.			