

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

▶ See separate instructions.

**Part I Reporting Issuer**

1 Issuer's name <b>EASTGROUP PROPERTIES, INC.</b>		2 Issuer's employer identification number (EIN) <b>13-2711135</b>	
3 Name of contact for additional information <b>BRUCE CORKERN, SR VP &amp; CONTROLLER</b>	4 Telephone No. of contact <b>601-354-3555</b>	5 Email address of contact	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact <b>190 EAST CAPITOL STREET, SUITE 400</b>		7 City, town, or post office, state, and Zip code of contact <b>JACKSON, MS 39201-2152</b>	
8 Date of action <b>3/31/11, 6/30/11, 9/30/11, 12/30/11</b>		9 Classification and description <b>COMMON STOCK</b>	
10 CUSIP number <b>277 276 101</b>	11 Serial number(s)	12 Ticker symbol <b>EGP</b>	13 Account number(s)

**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 ▶ **EASTGROUP PROPERTIES, INC. DISTRIBUTED QUARTERLY CASH DISTRIBUTION TO ITS COMMON SHAREHOLDERS FOR THE 2011 TAX YEAR. A PORTION OF THESE DISTRIBUTIONS REPRESENT A NONTAXABLE RETURN OF CAPITAL. THESE DISTRIBUTIONS WERE PAID ON 3/31/11, 6/30/11, 9/30/11 AND 12/30/11.**

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 18.9827% OF THE TOTAL DISTRIBUTION RECEIVED.**

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 RETURN OF BASIS REPRESENTS DISTRIBUTIONS ASSOCIATED WITH THE 2011 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. SECTION 301(c)(2).

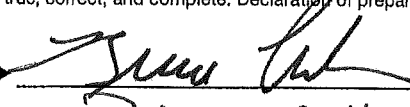
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18 Can any resulting loss be recognized? ▶ N/A

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

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Sign Here	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.			
	Signature ▶ 	Date ▶ <u>1/23/12</u>		
Paid Preparer Use Only	Print your name ▶ <u>Bruce Colkorn</u>	Title ▶ <u>Chief Accty Officer</u>		
	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.		