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 Reporting	lecuor				
	issuer			O I	
1 Issuer's name				2 Issuer's employer identification number (EIN)	
EASTGROUP PROPERTIE	S, INC.			13-2711135	
3 Name of contact for ad	ditional information	4 Telephon	e No. of contact	5 Email address of contact	
	İ				
BRUCE CORKERN, SR VP		******************	601-354-3555		
6 Number and street (or F	P.O. box if mail is not d	lelivered to s	street address) of contact	7 City, town, or post office, state, and Zip code of contact	
190 EAST CAPITOL STRE	ET SHITE 400			JACKSON, MS 39201-2152	
8 Date of action	L1, 3011L 400	9 Class	sification and description	JACKSON, 1813 33201-2132	
o bato of aotion		June	moderal and docomposition		
3/31/2015, 6/30/2015, 9/30/	2015. 12/31/2015	COMMO	N STOCK		
10 CUSIP number	11 Serial number(s)		12 Ticker symbol	13 Account number(s)	
	1		,		
277 276 101			EGP	1	
	onal Action Attach	additiona		e back of form for additional questions.	
				e against which shareholders' ownership is measured for	
				H DISTRIBUTIONS TO ITS COMMON SHAREHOLDERS	
				ONTAXABLE RETURN OF CAPITAL. THESE	
DISTRIBUTIONS WERE PA					
· · · · · · · · · · · · · · · · · · ·					
				Manual (1997)	
·					
15 Describe the quantita	tive effect of the organ	izational act	tion on the basis of the securi	ty in the hands of a U.S. taxpayer as an adjustment per	
share or as a percent	age of old basis ► THI	E BASIS OF	THE SECURITY SHOULD B	SE REDUCED BY 1.18547% OF THE TOTAL	
DISTRIBUTION RECEIVED)				
HEATT TO A THE TOTAL AND THE T					
			·····		
					
					
					
				· · · · · · · · · · · · · · · · · · ·	
 					
			' '	ation, such as the market values of securities and the	
				CIATED WITH THE 2015 TAX YEAR WHICH ARE IN	
EXCESS OF THE CURREN	NT YEAR AND ACCU	MULATED E	ARNINGS AND PROFITS.		
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Par	t II	Organizational Action (continued)		
17	List t	the applicable Internal Revenue Code section(s) and subsection(s) upon w	nich 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		
-			AND A SECTION AND AND AND AND AND AND AND AND AND AN	
19	Prov	vide any other information necessary to implement the adjustment, such as	the reportable tax year ► N/A	
				
		·		
			·	
	b	Inder penalties of perjury, I declare that I have examined this return, including accor elief, it is true, correct, and complete. Declaration of preparer (other than officer) is be	npanying schedules and statements, a ased on all information of which prepare	nd to the best of my knowledge and er has any knowledge.
Sign		Arm if the	1/2	25/16
Her	e s	ignature VIV	Date ►	
	þ	rint your name ► BRUCE CORKERN		COUNTING OFFICER
Pai		Print/Type preparer's name Preparer's signature		Check if PTIN self-employed
	pare On			Firm's EIN
		Firm's address ►		Phone no.
Seno	Form	n 8937 (including accompanying statements) to: Department of the Treasu	ry, Internal Revenue Service, Ogde	en, UT 84201-0054