Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Part I Reporting I	ssuer			•
1 Issuer's name				2 Issuer's employer identification number (EIN)
iShares MSCI Chile ETF				26-0354645
3 Name of contact for additional information 4 Telephone No. of contact				5 Email address of contact
			1-800-474-2737	isharesetfs@blackrock.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
c/o BlackRock Inc., 1 Unive	ersity Square Dr			Princeton, NJ 08540
8 Date of action 9 Classification and description				i inidatan, na dadi ta
8/31/2024	Ι .		Stock - Regulated Inve	
10 CUSIP number	nber 11 Serial number(s)		12 Ticker symbol	13 Account number(s)
464286640			ECH	
	onal Action Attac	ch additiona		. See back of form for additional questions.
				date against which shareholders' ownership is measured for
the action ► On Jun	e 17, 2024 the issue	er paid a dist	ribution to common sha	reholders recorded June 11, 2024.
All or a portion of each dis	tribution constitute	es a non-taxa	ble return of capital.	
·	age of old basis ► T	he portion of	the distribution that cor	ecurity in the hands of a U.S. taxpayer as an adjustment per nstitutes a non-taxable return of capital will decrease a U.S. lows:
			•	
Distribution payable on: Per Share Reduction of Basis in Commo			mon Stock	
June 17, 2024		0.016807		
	_			Iculation, such as the market values of securities and the to distributions paid during the year ended August 31,
				d during the taxable year ended August 31, 2024 in excess
of the issuer's current and				
		J p. 0		

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 Nol 10/22/2024 Signature ▶ Date ▶ Print your name ▶ Denise Xiong Title ▶ Assistant Treasurer Preparer's signature Date Print/Type preparer's name PTIN Check [if Paid self-employed **Preparer** Firm's name Firm's EIN ▶ **Use Only** Phone no. Firm's address ▶ Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054

The information contained herein is being provided pursuant to the requirements of Section 6045B of the Internal Revenue Code of 1986, as amended. The information in this document does not constitute tax advice and should not be construed to take into account any shareholder's specific circumstances. Holders and nominees should consult their own tax advisors regarding the particular tax consequences of the organizational action (as described in this document) to them, including the applicability and effect of all U.S. federal, state, and local and foreign tax laws.