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

		D	1		•					
_	art I	Reporting	issuer				1			
1	Issuer's	name		2 Issuer's employer identification number (EIN)						
_	Nama	of contact for ad-	ditional information	4 T	elephone No. of cont	ant	5 Email address of contact			
3	Name of contact for additional information 4			4 1	elephone No. of Cont	acı	5 Email address of contact			
6	Number	r and street (or F	P O box if mail is not	delive	ered to street address	s) of contact	7 City, town, or post office, state, and Zip code of conta			
Ū	Number and street (or P.O. box if mail is not delivered to street address) of contact						1 only, town, or post onlos, state, and Elp code of conta			
8	Date of action 9 Cla				9 Classification and	assification and description				
10	CUSIP number 11 Serial number(s)			(s)	12 Ticker	symbol	13 Account number(s)			
P	art II	Organization	onal Action Atta	ch ad	ditional statements	if needed. S	See back of form for additional questions.			
14	Descr	ibe the organiza	itional action and, if a	applica	able, the date of the a	action or the d	date against which shareholders' ownership is measured for			
	the ac	ction ►								
15	Donor	ibo the guantita	tive offect of the ergo	onizoti	ional action on the ba	aia of the accu	write in the hands of a LLC taypover as an adjustment per			
13		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 ►								
	Silaic	or as a percent	age of old basis F							
16	Descr	ibe the calculati	on of the change in b	oasis a	and the data that sup	ports the calcu	culation, such as the market values of securities and the			
	valuat	tion dates ►								

PowerShares Global Short Term High Yield Bond Portfolio

EIN: 46-2339236

Form 8037 (Rev. 12-2011)	_

Par	Ш	Organizational Action (contin	ued)						
17	List the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶							
18 Can any resulting loss be recognized? ►									
19	Provide	any other information necessary to in	nplement the adjustment, such as	the reportable tax year ▶					
	Unde	er penalties of perjury, I declare that I have	examined this return, including accom-	panying schedules and statements	, and to the best of my knowledge and				
	belie	f, it is true, correct, and complete. Declarat	ion of preparer (other than officer) is ba	ised on all information of which prep	parer has any knowledge.				
Sign									
Here		ature▶ S/ STEVEN M.	HILL	Date ► 02	/11/2015				
			11122						
	Print	your name ►		Title ►					
Paic	_	Print/Type preparer's name	Preparer's signature	Date	Check if PTIN				
	oarer				self-employed				
	Only	Firm's name ▶	·	<u> </u>	Firm's EIN ▶				
		Firm's address ▶			Phone no.				
Send	Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054								