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

Reporting issuer					
1 Issuer's name The Options Clearing Corporation			2 Issuer's employer identification number (EIN) 36-2756407		
			5		
Thomas Crider	1 1 1 1 1	312.322.6200	Form8937@theocc.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		
125 S. Franklin Street Suite 1200			Chicago, IL 60606		
		sification and description			
February 20, 2024		on shares of The Cooper Co			
10 CUSIP number 11 Serial number(s)	12 Ticker symbol	13 Account number(s)		
All serie	es	coo			
			e back of form for additional questions.		
			e against which shareholders' ownership is measured for		
-			panies, Inc. (COO) is replaced by 4 contracts to reflect a		
4-for-1 share split. Effective date is February	Author Statement of the Control of t	shares of the cooper comp	ratios, inci (000) is replaced by recitations to reflect a		
4-101-1 Share spilt. Effective date is rebidary	20, 2024.				
15 Describe the quantitative effect of the orga	nizational ac	tion on the basis of the securi	ty in the hands of a U.S. taxpayer as an adjustment per		
snare or as a percentage of old basis 25	% of the ba	sis in each existing contract	is allocated to each of the 4 replacement contracts.		
16 Describe the calculation of the change in b	asis and the	data that supports the calcula	ation, such as the market values of securities and the		
valuation dates ► Tax basis in existing co	ontracts is a	llocated proportionately acre	oss the replacement contracts.		
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Par	t II	Organizational Action (continued)	1111	
17	E E A L	e applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatme	nt is based ▶	Section 1012 (a)
			1 11	
-				
18	Can an	ny resulting loss be recognized? ► No.		11 (1) 542
100000000000000000000000000000000000000				
	11201-220-0			
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3				
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19	Provide	e any other information necessary to implement the adjustment, such as the reportable tax y	rear ▶	
			A l	
				- 1
	Unde	er penalties of perjury, I declare that I have examined this return, including accompanying schedules an	d statements, ar	nd to the best of my knowledge and
	belie	f, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of	of which preparer	has any knowledge.
Sign		01 1:		
Here		ature Thomas Circle Date	3/4/2	024
	Signa	addres / / With the same of th		
	Butan	Tale N	Executive D	iractor
		your name ► Thomas Crider Print/Type preparer's name Preparer's signature Date	Executive D	DTIN
Paid		The state of the s		heck if FIIIN elf-employed
	arer			
Use	Only			rm's EIN ▶
		Firm's address ▶		hone no.
Send	Form 89	937 (including accompanying statements) to: Department of the Treasury, Internal Revenue	Service, Ogder	n, UT 84201-0054