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 I Reporting Issuer				
1 Issuer's name			2 Issuer's employer identification number (EIN)	
RREEF Property Trust, Inc.			45-4478978	
3 Name of contact for additional information 4 Telephone No. of contact		5 Email address of contact		
Bulle Describ	415 060	0017		
Eric Russell 415-262-2017 6 Number and street (or P.O. box if mail is not delivered to street address) of contact		eric.russell@db.com		
• Hamber and street (or 1.0. box if mains no	t delivered to street	et address) of contact	7 City, town, or post office, state, and Zip code of contact	
101 California Street, 24th	Floor		San Francisco, CA 94111	
8 Date of action		ification and description	July 1 I direction of the second of the seco	
		BODIECTO TO SECTIONOLO. PERCENTICA EL TITORISMON DOS # SECTIONOLO VIX.		
SEE PART II LINE 14 BELOW	Class	A common stock		
10 CUSIP number 11 Serial num	nber(s)	12 Ticker symbol	13 Account number(s)	
		State of Charles & State Conference in the		
74972X 106 N/A		ZRPTAX	N/A	
Part II Organizational Action Attach	additional state	ements if needed. See back	of form for additional questions.	
			inst which shareholders' ownership is measured for	
			distributions to its Class A the distributions represent a	
			d on February 1, 2015; March	
4, 2015; April 1, 2015; May				
September 1, 2015; October 1				
of commercial and account a	, 2020, 211	2010/ 411	a December 2, 2013.	
			the hands of a U.S. taxpayer as an adjustment per	
		of the security sho	uld be reduced by 78.94% of	
the total distribution recei	ved.			
16 Describe the calculation of the change in	hasis and the d	ata that supports the calculation	n, such as the market values of securities and the	
valuation dates The non-divide	end distri	bution represents of	distributions associated with	
			r and accumulated earnings and	
profits.				

Partil	Organizational Action (continued)	
17 List the 301 (c) (the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based I.R.C. Sect	ion
301(0)(.		

		44

ACTIVITY AND RECORD OF THE TOTAL		
	70 A 70	
18 Can ar	any resulting loss be recognized? N/A	

		-
		180
19 Provide	de any other information necessary to implement the adjustment, such as the reportable tax year N/A	
		-
		·
Un	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowle	dge 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	1 000	1
	Signature Date Date	٤
	FRIC RUSSELL CFO	
Pri	Title Title	
Paid	Print/Type preparer's name Preparer's signature Date Check if PTIN	
Preparer		66364
Use Only	Firm's name Firm's EIN ▶13-55	
	Firm's address ▶200 East Randolph Dr., Suite 5500 Chicago, IL 606Q⊉hone no. 312—665	-1000
Send Form 8	8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Orden, UT 84201-0054	