Form **8937**(December 2017) Department of the Treasury

Report of Organizational Actions Affecting Basis of Securities

See separate instructions.

OMB No. 1545-0123

Date Date Date Date Deemed distribution to convertible instrument holders 01/28/2020 03/13/2020 03/16/2020 03/27/2020 \$9.15 per \$1,000 original principal 04/28/2020 06/09/2020 06/10/2020 06/25/2020 \$9.26 per \$1,000 original principal 07/28/2020 09/09/2020 09/10/2020 09/25/2020 \$9.28 per \$1,000 original principal 10/28/2020 12/04/2020 12/07/2020 12/22/2020 \$9.31 per \$1,000 original principal	Internal Revenue Serv				- See Separ	ate monucions.				
Anthem, Inc. 3 Name of contact for additional information 4 Telephone No. of contact 5 Email address of contact Chris Rigg (317) 488-6887 chits.rigg@anthem.com 7 City, town, or post office, state, and ZIP code of contact 220 Virginia Avenue 8 Date of action 9 Classification and description Indianapolis, IN 46204 10 CUSIP number 11 Serial number(s) 12 Ticker symbol 13 Account number(s) 10 CUSIP number 11 Serial number(s) 12 Ticker symbol 13 Account number(s) NNA NNA NNA Part II Organizational Action Attach additional statements if needed. See back of form for additional questions. 14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ▶ During calendar year 2020, Anthem. Inc. declared and paid distributions to shareholders of its common stock. Total Declaration Ex-Dividend Record Payment Date Date Date Part Date Part Date Part Payment 07/28/2020 08/09/2020			ssuer							
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Par	t II	0	rganizational Action (c	ontinued)						
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17			pplicable Internal Revenue Co ion 301(c)	de section	(s) and subsection(s) upon	which the tax t	reatmen	t is based I		_
			ion 305(b)							_
			ion 305(c)							_
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10	Can		roculting loop be recognized?	Note	loss transaction					
18	Can	any	resulting loss be recognized? I	Not a	1055 transaction.					_
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19	Prov	vide a	ny other information necessar	v to implei	ment the adjustment such	as the reportab	ole tax ve	ear ▶ 2020	n	
		vide a	ary other information necessar	y to implo	none the adjustment, saon	ao ino reportas	no tax ye	2020	0	_
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	Τ.	Inder	nenalties of periuny I declare that	I have evar	nined this return, including acc	companying sche	dules and	1 statements	s, and to the best of my knowledge a	
			t is true, correct, and complete. De							uic
Sign	ı		$\bigcap_{i=1}^{n}$							
Here)	Signatu	ure ▶				Date ►	12/23/20		
	F		our name ► Christopher H. L.	aFollette	Dropororio signati		Title ►	Vice Pre	esident, Tax / Tax Officer	
Paid			Print/Type preparer's name		Preparer's signature		Date		Check if self-employed	
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Use	Or	··y	Firm's name ► Firm's address ►						Firm's EIN ► Phone no.	_
Send	Forn		7 (including accompanying sta	atements)	to: Department of the Treas	sury, Internal Re	evenue S	Service, Og		_