

Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

Part I Reporting Issuer

1 Issuer's name Realty Income Corporation		2 Issuer's employer identification number (EIN) 33-0580106	
3 Name of contact for additional information	4 Telephone No. of contact 858-284-5000	5 Email address of contact	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact 11995 El Camino Real		7 City, town, or post office, state, and Zip code of contact San Diego, CA 92130	
8 Date of action March 16, 2015		9 Classification and description Common Stock	
10 CUSIP number 756109-104	11 Serial number(s)	12 Ticker symbol O	13 Account number(s)

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 ▶ **Realty Income Corporation distributed a monthly cash distribution on March 16, 2015 to its common shareholders.**

A portion of this distribution, estimated between 20% to 35%, represents a non-dividend distribution.

15 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 ▶ **The basis of the security should be reduced by an estimate of 20% to 35% of the March 2015 distributions received. This non-dividend distribution percentage is an estimate and the actual non-dividend distribution percentage will not be known until the end of 2015.**

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ▶ **The non-dividend distribution represents distributions associated with the 2015 tax year which are in excess of the estimated 2015 accumulated earnings and profits.**

Part II Organizational Action (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ _____

I.R.C. section 301(c)(2)

18 Can any resulting loss be recognized? ▶ _____

Not applicable.

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ _____

Not applicable.

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

Signature ▶  Date ▶ 3/16/15

Print your name ▶ **Sean Nugent** Title ▶ **Vice President, Controller**

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶		Phone no.	
Firm's address ▶				