

Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

Part I Reporting Issuer

| | | | |
|--|-----------------------------------|---|-----------------------------|
| 1 Issuer's name | | 2 Issuer's employer identification number (EIN) | |
| Vanguard Real Estate II Index Fund Institutional Plus Shares | | 82-2389219 | |
| 3 Name of contact for additional information | 4 Telephone No. of contact | 5 Email address of contact | |
| Vanguard Investor and Client Information | 877-662-7447 | online@vanguard.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 | |
| P.O. Box 982901 | | El Paso, TX 79998-2901 | |
| 8 Date of action | | 9 Classification and description | |
| January 31, 2025 | | Regulated Investment Company - Institutional Plus | |
| 10 CUSIP number | 11 Serial number(s) | 12 Ticker symbol | 13 Account number(s) |
| 922031695 | | VRTPX | |

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 ▶ Vanguard Real Estate II Index Fund Institutional Plus Shares ("The Fund") made cash distributions during the calendar year 2024 to its shareholders as follows:

| 2024 Record Date | Distribution Per Share |
|--------------------|------------------------|
| March 21, 2024 | \$0.1785 |
| June 27, 2024 | \$0.2455 |
| September 26, 2024 | \$0.1890 |
| December 20, 2024 | \$0.2016 |

For 2024, The Fund determined that a portion of these distributions constitute a non-taxable return of capital.

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 ▶ Of The Fund's total cash distributions during 2024 to its shareholders, a portion is non-taxable return of capital. This amount is a non-taxable return of capital to the extent of a shareholder's tax basis in each of its Fund shares, with any remaining amount being taxed as a capital gain to a shareholder.

| 2024 Record Date | Reduction in Basis Per Share |
|--------------------|------------------------------|
| March 21, 2024 | \$0.043126 |
| June 27, 2024 | \$0.059313 |
| September 26, 2024 | \$0.045662 |
| December 20, 2024 | \$0.048707 |

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 calculation of the return of capital is based upon The Fund's accumulated earnings and profits as of its fiscal year ended January 31, 2025. The amount of the return of capital should be applied against the shareholder's adjusted basis of the stock, reducing the basis until it is zero. The amount of the return of capital, if any, that exceeds a zero basis shall be treated as a gain from the sale or exchange of property.

Part II **Organizational Action** (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ _____
Internal Revenue Code Sections 301(c) and 316(a).

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 ▶ None.

Sign Here 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.

Signature ▶ Signed copy is maintained by the issuer Date ▶ 2/25/2025

Print your name ▶ Deborah Perch Title ▶ Director of Fund Tax

| | | | | | |
|-------------------------------|----------------------------|----------------------|------|---|--------------|
| 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 ▶ |
| | Firm's address ▶ | | | | Phone no. |