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		1.000 To 1000							
1 Issuer's name			2 Issuer's employer identification number (EIN)						
Berkshire Hills Bancorp, Inc.	04-3510455								
Name of contact for additional information			5 Email address of contact						
	(3 4) (31)								
Allison O'Rourke, Investor Relations Officer 413-236-3149			AORourke@berkshirebank.com						
6 Number and street (or P.O. box if mail is not d	7 City, town, or post office, state, and Zip code of contact								
24 North Street	Pittsfield, MA 01201								
8 Date of action 9 Classification and description									
October 13, 2017		Hills Bancorp, Inc. Common Sto							
10 CUSIP number 11 Serial number(s)	1	12 Ticker symbol	13 Account number(s)						
004000407									
Part II Organizational Action Attach		tatements if needed See heel	of form for additional acceptions						
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									
			ed its acquisition of Commerce Bancshares Corp.						
("Commerce") through the merger of Commerce	with and int	Porkshire (the "Morgar") As	a result of the Merger, each share of Commerce						
			Commerce shareholder is permitted to own, either						
			C.F.R. Section 225.41 of Regulation Y, more than						
9.9% of the outstanding Berkshire common stock as of the closing of ther Merger. Accordingly, any Commerce shareholder that would have otherwise received shares of Berkshire common stock in excess of such 9.9% limit instead received shares of Berkshire's Series B									
			erce common stock that was not convertible into						
Berkshire common stock. To the extent that the									
			alue equivalent of the fractional share was paid in						
lieu of issuing a fractional share of Berkshire co	IIIIIIOII Stock	of Preferred Stock.							
share or as a percentage of old basis ► The	Merger qualifies a result, no of Berkshire of took or Prefectock are deemed to had of Berkshire of the stock surrect with the stock for the basis care of th	fies as a tax-free reorganization taxable gain or loss will be recommon stock or Preferred Stock. Commerce sharehomed to have received the fraction of the stock	onal share in the exchange and then as having taxable gain or loss equal to the difference tional share and the amount of cash received. ck should be the same as such shareholder's tributable to any fractional shares as discussed a payment for fractional Berkshire shares, based ays immediately prior to October 13, 2017.						
State of the state of the state of the	- John Jill	Zon Exonange was 450.55.							
To 100 to		-6/10							
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		7.0							

Form 893	7 (Rev.	12-2011)				Page 2
Part II		Organizational Action (continued)				
17 Lis	t the a	applicable Internal Revenue Code section(s	s) and subsection(s) upon which the t	ax treatment	is based ▶	
					_	
					- Const	
						44
				-		
18 Ca	n any	resulting loss be recognized? ► No loss mmon stock or Preferred Stock. If a taxa	can be recognized upon the excha	ange of Com	merce con fractional:	mon stock for shares of share of Berkshire common
stock or	Prefe	erred Stock deemed to have been received	red in the exchange, this loss can be	e recognize	d.	
19 Pr	ovide ber 13	any other information necessary to implem 3, 2017. Consequently, the reportable ta	nent the adjustment, such as the repo x year of the Commerce sharehold	ers for repo	ear The tr rting the ta	x effect of the share
exchange	ge is t	he tax year that includes the October 13	3, 2017 date. This is the 2017 calend	dar year for	those who	report taxable income on the
		endar year.				
		nareholders are urged to consult with th ance provided herein should not be cons		federal inco	me tax cor	sequences of the Merger,
and the	quiuc	mice provided north should not be some				
	_					
	Under belief	r penalties of perjury, I declare that I have exam , it is true, correct, and complete. Declaration of	nined this return, including accompanying preparer (other than officer) is based on al	schedules and Il information o	I statements, f which prepa	and to the best of my knowledge and arer has any knowledge.
Sign Here	Signa	ature P Con		Date ▶	Novem	ber 20, 2017
	Drint :	your name ► Allison O'Rourke		Title ▶	EVP, Inve	stor Relations Officer
Paid		Print/Type preparer's name	Preparer's signature	Date		Check if self-employed
Prepa Use C		Firm's name				Firm's EIN ▶
		Firm's address ► 937 (including accompanying statements) to	o: Department of the Tressum, Intern	al Revenue 9	Service. Oar	Phone no. den. UT 84201-0054
Send FC	שט ווות	or uncluding accompanying statements) t	o. Dopartinone of the freading, intern		, -9	