## 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)
Archrock, Inc.		74-3204509
3 Name of contact for additional information	n 4 Telephone No. of contact	5 Email address of contact
David S. Miller	investor.relations@archrock.com	
David S. Miller (281) 836-8895  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
16666 Northchase Drive		Houston, TX 77060
8 Date of action	9 Classification and description	
	•	
2015 - see below		nolders of Archrock, Inc. common stock
10 CUSIP number 11 Serial numb	per(s) 12 Ticker symbol	13 Account number(s)
03957W106	NYSE: AROC	
		ee back of form for additional questions.
	The second secon	te against which shareholders' ownership is measured for
		EXH)) paid the following cash distributions per share to
the common shareholders of record on the	specified dates:	10 3 00 00 00 00 00 00 00 00 00 00 00 00
Date of Record:	Amount per Share:	Date Paid:
February 9, 2015	\$0.15	February 17, 2015
May 11, 2015	\$0.15	May 18, 2015
August 10, 2015	\$0.15	August 17, 2015
October 26, 2015	\$0.15	October 30, 2015
		TO THE STATE OF TH
45 - 5 - 25 - 1		
•	<del>-</del>	ity in the hands of a U.S. taxpayer as an adjustment per
		ately eighty-eight (88) percent of each of the quarterly
		treated as a return of capital to the extent of the
		eceived by a shareholder that is in excess of that
shareholder's tax basis in AROC shares w	Il be taxed as a capital gain for U.S. incom	e tax purposes.
4 10 4 10 1		
		**************************************
_		ation, such as the market values of securities and the
		C does not believe that it had any accumulated earnings
		nd profits in 2015 equal to approximately twelve (12)
percent of the cash distributions paid to sh	pareholders in 2015.	
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Form 893		. 12-2011)					Page 2
Part		Organizational Action (continued	d)				
17 Li	ist the	applicable Internal Revenue Code section	on(s) and subsection(s) upon which the tax t	reatmen	t is based ▶	301(c) and 316(a)	
				· · -			
FT 10 1 10	-				-		
18 C	an any	resulting loss be recognized? ► N/A			8.	2 8	
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		20 20 10	V 42		- 60		
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		200 A010 V					
<b>19</b> Pr	rovide	any other information necessary to imple	ement the adjustment, such as the reportab	la tav va	ar b None		
10 11	Ovide	any other information recessary to imple	ement the adjustment, such as the reportable	ie tax ye	NOTICE INCIDE		
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				No. at the second		- III	
		754					
		E-2000	300				
	Unde	r penalties of perjury, I deciare that I have exa	umined this return, including accompanying sched of preparer (other than officer) is based on all infon	lules and	statements, an	d to the best of my know	ledge and
Sign	Delle			mation of	which prepare	r nas any knowledge.	
Here	Cimna	iture > SMI		D-1- 6	2/11	1/16	
	olgna	ture > 9)///		Date ►		770	
	Print	your name ► David S. Miller		Title ▶	Sr. Vice Pre	sident/Chief Financia	l Officer
Paid		Print/Type preparer's name	Preparer's signature	Date	C	heck if PTIN	
Prepa	rer			<u> </u>	s	elf-employed	
Use C		Firm's name				irm's ElN ▶	
Send Fo	rm 89	Firm's address ▶ 37 (Including accompanying statements)	to: Department of the Treasury, Internal Re	venue S		hone no. n. UT 84201-0054	<del></del>