Form **8937**

(December 2017)
Department of the Treasury
Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

| Part I Reporting Iss | uer | | | | | |
|---|---|---------------|--|---|--|--|
| 1 Issuer's name | | | | 2 Issuer's employer identification number (EIN) | | |
| COMMERCE BANSHARES, INC. | | | | 43-0889454 | | |
| 3 Name of contact for addition | onal information | 4 Telephon | e No. of contact | 5 Email address of contact | | |
| PAUL STEINER | | | 816-760-8092 | PAUL.STEINER@COMMERCEBANK.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 | | |
| PO BOX 419248 | | | | KANSAS CITY, MO 64141 | | |
| 8 Date of action | | 9 Class | 9 Classification and description | | | |
| 12/18/2019 | | соммо | COMMON STOCK | | | |
| 10 CUSIP number 1 | 1 Serial number(s |) | 12 Ticker symbol | 13 Account number(s) | | |
| 200525103 | | | СВЅН | | | |
| Part II Organization | al Action Attac | h additiona | statements if needed. See bad | ck of form for additional questions. | | |
| | | | | inst which shareholders' ownership is measured for | | |
| | | | | SE OF BUSINESS ON DECEMBER 3,2019 WERE | | |
| | | | NED ON WHICH IT WAS DISTRIB | INITED STATES FEDERAL INCOME TAX AND | | |
| THEREFORE AFFECTS THE | TAX BASIS OF SI | TAKES OWN | VED ON WHICH IT WAS DISTRIB | JIED. | | |
| SOME SHAREHOLDERS WIL | L RECEIVE CASH | FOR FRAC | TIONAL SHARES, WHICH IS TRE | EATED AS REDEMPTION FOR UNITED STATES | | |
| | | | | E QUESTIONS ABOUT THE TAX IMPLICATIONS | | |
| OF CASH PAID FOR FRACTI | ONAL SHARES. | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 15 Describe the quantitative share or as a percentage | e effect of the organ e of old basis ► A | nizational ac | tion on the basis of the security in t DER'S BASIS IN ONE (1) SHARE | he hands of a U.S. taxpayer as an adjustment per OF CBI COMMON STOCK AFTER THE | | |
| DISTRIBUTION WILL BE 95.2 | 238095 PERCENT | OF THE BA | SIS SHAREHOLDER HAD IN ONE | (1) SHARE OF CBI COMMON STOCK BEFORE | | |
| THE DISTRIBUTION. | | | | | | |
| | | | | | | |
| | ······································ | | | | | |
| | | | | | | |
| | | | The state of the s | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 16 Describe the calculation valuation dates ► (100/(| | | data that supports the calculation, | such as the market values of securities and the | | |
| | | | | | | |
| | | | - | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| Part II | Organizational Action (continued) | |
|----------------|--|------------------------------------|
| | | DISTRIBUTION OF |
| 17 List th | ne applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based | DISTRIBUTION OF |
| STOCK IS | NOT TAXABLE UNDER CODE SECTION 305(a). BASIS IN STOCK WITH RESPECT TO WHICH THE DI ATED BETWEEN THE OLD AND NEW SHARES IN PROPORTION TO THE FAIR MARKET VALUES OF | FACH ON THE DATE OF |
| | FION UNDER THE COLD AND NEW SHARES IN PROPORTION TO THE FAIR MARKET TREES OF | Enon on the price of |
| DISTRIBU | TOW ONDER THEOODE SECTION COVIG. | |
| | | |
| | | |
| 2 24/4-, 24/4- | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 18 Can | any resulting loss be recognized? ▶ NO | |
| | | |
| - | | |
| | | |
| | | |
|)====== | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | V V | |
| 19 Prov | de any other information necessary to implement the adjustment, such as the reportable tax year ▶ | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| | | |
| - | | |
| - | | |
| | | |
| | | |
| | | |
| | | |
| - 1 | nder penalties of perjury, declare that I have examined this return, including accompanying schedules and statements, | and to the best of my knowledge ar |
| b | elief, it is true, correct and complete. Declaration of preparer (other than officer) is based on all information of which preparer | arer has any knowledge. |
| Sign | | |
| Horo | ignature ▶ Date ▶ 12 - | 18-19 |
| 3 | | |
| P | nint your name = 1(1) | miller |
| Paid | Print/Type preparer's name Preparer's signature Date | Check if PTIN |
| Prepare | er | self-employed |
| Use On | | Firm's EIN ▶ |
| | Firm's address ▶ | Phone no. |
| Send Form | n 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Og | uen, UT 64201-0054 |