

### Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

#### Part I Reporting Issuer

1 Issuer's name  ASML Holding N.V.			2 Issuer's employer identification number (EIN)  N/A	
3 Name of contact for additional information  Craig DeYoung		4 Telephone No. of contact  +1 (480) 383 - 4005	5 Email address of contact  craig.deyoung@asml.com	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact  8555 South River Parkway			7 City, town, or post office, state, and Zip code of contact  Tempe, AZ 85284	
8 Date of action  November 26, 2012		9 Classification and description  Ordinary shares and ADRs		
10 CUSIP number  See attachment	11 Serial number(s)  N/A	12 Ticker symbol  ASML	13 Account number(s)  N/A	

#### 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 ► See attachment.

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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 ► See attachment.

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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 ► See attachment.

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**Part II Organizational Action** (continued)

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

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18 Can any resulting loss be recognized? ▶ See attachment.

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

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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 ▶ *Peter Hennink* Date ▶ 8/11/2013  
Print your name ▶ Peter Hennink Title ▶ CFO

<b>Paid Preparer Use Only</b>	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.