Department of the Treasury

Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

OMB No. 1545-0123

Internal Revenue Service Part I Reporting Issuer 2 Issuer's employer identification number (EIN) Issuer's name SENTRY SMALL/MID CAP INCOME CLASS **FOREIGNUS** 3 Name of contact for additional information 4 Telephone No. of contact 5 Email address of contact FRANCISCA JULINDA (647) 789-2516 fjulinda@sentry.ca 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 2 QUEEN STREET EAST, 20TH FLOOR TORONTO, ONTARIO, CANADA, M5C 3G7 9 Classification and description 8 Date of action PAID A "RETURN OF CAPITAL" DISTRIBUTION **SEE BELOW** 10 CUSIP number 11 Serial number(s) 12 Ticker symbol 13 Account number(s) N/A N/A Part II Organizational Action Attach additional statements if needed. See back of form for additional questions. Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► RETURN OF CAPITAL AS PART OF DISTRIBUTIONS THAT OCCURRED THROUGHOUT THE 2017 TAXABLE YEAR 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 ▶ THE ADJUSTMENT TO A SECURITYHOLDER'S COST BASIS IS AS FOLLOWS: **SERIES A: \$0.23221 PER SECURITY** SERIES F: \$0.20198 PER SECURITY SERIES I: \$0.09232 PER SECURITY SERIES O: \$0.09978 PER SECURITY **SERIES B: \$0.23366 PER SECURITY** 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 ► N/A

| Part | I | Organizational Action (continued) | | | • |
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| | | applicable Internal Revenue Code section(s) and subsection | on(s) upon which the tax t | reatment is based ▶ | • |
| IRC SE | IRC SECTION 301(c)(2), 312 AND 316 | | | | |
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| 18 Can any resulting loss be recognized? ► N/A | | | | | |
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| Provide any other information necessary to implement the adjustment, such as the reportable tax year ► N/A | | | | | |
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| Paid | 1 mit | Print/Type preparer's name Preparer's signati | ure O · n | Date | DTINI |
| | 0 K 0 | GREGORY PAPINKO | ire Carlapla | 4/13/2018 | Check if P01452981 |
| Preparent of the Prepar | | Firm's name PRICEWATERHOUSECOOPERS LLP | | 1 | Firm's EIN ▶ 98-0189320 |
| USE (| IIIY | Firm's address ► 18 YORK STREET, SUITE 2600, TORO | NTO, ONTARIA, CANAL | DA, M5J 0B2 | Phone no. (416) 863-1133 |
| Send F | orm 89 | 37 (including accompanying statements) to: Department o | | | |