► See separate instructions.

Part Reporting	j issuer					
1 Issuer's name		2 Issuer's employer identification number (EIN)				
Cambridge G	rowth Compani	N/A				
3 Name of contact for a	additional information	4 Telephor	ne No. of contact	5 Email address of contact		
Duarte Boucir	iha	416-68	1-1752	dboucinha@ci.com		
6 Number and street (o	r P.O. box if mail is no	t delivered to	street address) of contact	7 City, town, or post office, state, and Zip code of contact		
2 Queen Stree	t East, 20th Flo	or		Toronto, Ontario, M5C 3G7		
8 Date of action		9 Class	sification and description			
Tax Year 2015	Tax Year 2015 Non-taxable dis		Non-taxable dis	tribution		
10 CUSIP number	11 Serial number	(s)	12 Ticker symbol	13 Account number(s)		
N/A	N/A		N/A	N/A		
		ch additiona	-	e back of form for additional questions.		
14 Describe the organi	zational action and, if	applicable, the	e date of the action or the date	e against which shareholders' ownership is measured for		
the action ►				shareholders throughout the 2015		
	taxation y	ear. See qu	uestion 15 for per un	it information of the return of capital		
	that occur	red throu	<u>ghout the 2015 taxab</u>	le year.		
	tative effect of the orgen tage of old basis \blacktriangleright			ty in the hands of a U.S. taxpayer as an adjustment per		
16 Describe the calcular valuation dates ►	ation of the change in N/A	basis and the	data that supports the calcula	ation, such as the market values of securities and the		

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Pa	t II	Organizational Action (continued)			
17	List the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tre	eatment is based Ⅰ	• I <u>RC section 301(c)(2),</u> 312 and 316
18	Can an	\prime resulting loss be recognized? \blacktriangleright _ N/ A	A		
19	Provide	any other information necessary to implem	nent the adjustment, such as the reportable	e tax year ►	N/A
		· · · ·			
	Linde	r penalties of perjury, I declare that I have exami	ined this return including accompanying schedu	ules and statements	and to the best of my knowledge, and
	belie	, it is true, correct, and complete. Declaration of	preparer (other than officer) is based on all inform	nation of which prepa	arer has any knowledge.
Sigr		ΛΛΛ			
Her	e _{Signa}	ature ►		Date▶ 11/26	/2015
		David Pauli		Title▶ COO	
<u> </u>		your name ► David Pauli Print/Type preparer's name	Preparer's signature	Title► COO Date	Ohanta III if PTIN
Paie	d parer		-		Check if self-employed
	e Only	Firm's name			Firm's EIN ►
-		1			1

Send Form 8937 (including accompanyi	ng statements) to: Department of the Treas	sury, Internal Revenue Service, Ogden, UT 84201-0054

Phone no.

Firm's address ►