► See separate instructions.

P	art Reporting	lssuer								
1	Issuer's name		2 Issuer's employer identification number (EIN)							
	Black Creek Glo	obal Balanced	N/A							
3	Name of contact for add	ditional information	4 Telephon	e No. of contact	5 Email address of contact					
	Duarte Boucinh	a	416-681	1-1752	dboucinha@ci.com					
6	Number and street (or F	P.O. box if mail is not	delivered to s	street address) of contact	7 City, town, or post office, state, and Zip code of contact					
	2 Queen Street	East, 20th Floo	or		Toronto, Ontario, M5C 3G7					
8	Date of action		9 Class	sification and description						
	Tax Year 2014			Non-taxable dist	bution					
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)					
	N/A	N/A		N/A	N/A					
P	-		ch additiona		e back of form for additional questions.					
14	-				against which shareholders' ownership is measured for					
	the action ►				hareholders throughout the 2014					
					it information of the return of capital					
				ghout the 2014 taxabl						
				5	,					
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 \triangleright 0.42042 per unit									
		_	<u> </u>							
16			tion, such as the market values of securities and the							
	valuation dates \blacktriangleright	N/A								
_										

For Paperwork Reduction Act Notice, see the separate Instructions.

Form 8937	(Rev.	12-2011)
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Pa	t II	Organiz	ational Ac	tion (continu	ued)										
17	List the			enue Code se		and subsect	tion(s) upor	which the	e tax trea	atment	t is based	I► II 3	<u>RC</u> sect 12 and	<u>ion 30</u> 316	1(c)(2),
18	Can ar	ny resulting	loss be reco	gnized?►	N/A										
19	Provid	le any other	information r	necessary to in	npleme	ent the adjust	ment, such	as the rep	ortable	tax ye	ar 🕨	Ν	/A		
		-			-	-				-					
				clare that I have nplete. Declarati											owledge and
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	Sigr	nature ►						D	Date► 03-24-						
	Prin	nt vour name	David	Pauli					Т	itle Þ	COO				
Pai		Print/Type	preparer's na	me	P	Preparer's signa	ature			Date		Che	eck 🗌 if	PTIN	
	a parer	·											f-employed		
	e Only		ne 🕨									Firr	n's EIN ►		
	j											Dha			