► See separate instructions.

	art Reporting	Issuer							
1	Issuer's name		2 Issuer's emplo	2 Issuer's employer identification number (EIN)					
	Black Creek Int	ernational Equi	N/A	N/A					
3	Name of contact for add	ditional information	4 Telephor	ne No. of contact	5 Email address o	f contact			
	Duarte Boucinh	a	416-68	1-1752	dboucinha@o	ci.com			
6	Number and street (or F	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 Floo	r		Toronto, On	tario, M5C 3G7			
8	Date of action		9 Class	sification and description					
	Tax Year 2016			Non-taxable di	stribution	oution			
10	CUSIP number	11 Serial number(s	;)	12 Ticker symbol	13 Account number	ər(s)			
	N/A	N/A		N/A	N/A				
Pa			h additiona	I statements if needed. S					
14	Describe the organiza	tional action and, if a	oplicable, the	e date of the action or the da	ate against which sharehold	ers' ownership is measured for			
	the action ►	A non-taxa	ble distri	ibution was made to	shareholders throu	ghout the 2016			
		taxation ye	ar. See qu	uestion 15 for per u	nit information of t	he return of capital			
		that occurr	ed through	<u>ghout the 2016 taxa</u>	ble year.				
15	Describe the quantitat share or as a percenta	-			rity in the hands of a U.S. ta	axpayer as an adjustment per			
16	Describe the calculation valuation dates ►	on of the change in b ${ m N/A}$	asis and the	data that supports the calcu	lation, such as the market v	alues of securities and the			
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	Cat. No. 37752P	Form <b>8937</b> (12-2011)			

Form 8937	(Rev.	12-2011)
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Pa	t II	Organiza	ational Ac	tion (con	tinued)								
17						and subs	section(s)	upon wh	ch the tax	treatment	is based I	IRC sect 312 and	tion 301(c)(2), 316
			·										
18	Can an	ny resulting l	oss be recog	gnized? ►	N/A	L							
19	Provide	e anv other i	information n	acassany ti	o implem	ont the adi	ustment	such as t	he report:	ahla tay va	ar 🕨	N/A	
15	TIOVIU	e any other i	mormation n	iecessary to		ent the auj	ustinent,	Such as		able lax ye	ai 🕨	11/11	
												and to the bes arer has any kno	t of my knowledge and
0:		ei, it is true, co			aration of p	reparer (otri	er than on	cer) is bas	eu on an in	Iornation of	which prepa	arer has any kno	Jwiedge.
Sigr Her				/							16/2	/2017	
	Signature			/		_ Date ►	10/2	/ 201/					
	Drimi		David 1	David Pauli				Title ►	EVP				
		Print/Type	preparer's nan	ne		Preparer's s	ignature			Date		Chock	PTIN
Paie	a parer											Check if self-employed	
	e Only		ie 🕨		I					· · · · · · · · · · · · · · · · · · ·		Firm's EIN ►	
	<b>y</b>												

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054

Firm's address ►