► See separate instructions.

-	Issuer's name	133001			2 Issuer's employer identification	2 Issuer's employer identification number (EIN)			
	Plash Crash Clah	-1 D-1		N/A					
3	Black Creek Glob Name of contact for ad		()	e No. of contact	5 Email address of contact				
•			-	-681-1752	dboucinha@ci.com				
	Duarte Boucinha				-	7ID code of contact			
0	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 E	ast, 20th Floor		Toronto, Ontario, M50	C 3G7				
8	Date of action			sification and description					
	Tax Year 2019			Non-taxable	distribution				
10	CUSIP number 11 Serial number(s		s)	12 Ticker symbol	13 Account number(s)				
	N/A	N/A		N/A	N/A				
Pa	-				See back of form for additional question	IS.			
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 A non-taxable distribution was made to shareholders throughout the 2019 taxation year.								
					he return of capital that occurred the				
		the 2019 tax	1		ne return of cuptur that occurred th	ougnout			
			ubie jeui.						
15	Describe the quantita share or as a percent	-			urity in the hands of a U.S. taxpayer as an ac	ljustment per			
			0.04000 pci						
16	Describe the calculative valuation dates ►	ion of the change in ${ m k} N/A$	oasis and the	data that supports the cale	culation, such as the market values of securiti	ies and the			
	Donomucul: Doduction	Act Notice the	oonerste hee	tructions	0.4 Nr 077000	orm 8937 (12-2017)			
ror	Paperwork Reduction	ALL NULLE, SEE LIE	separate ins		Cat. No. 37752P Fo				

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Part		Organizational Action (continued)			,
17 L	_ist the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	eatment	is based I	 IRC section 301(c)(2), 312 and 316
					512 and 510
		27/1			
18 (Can any	v resulting loss be recognized? ►N/A			
19 F	Provide	any other information necessary to implement the adjustment, such as the reportabl	e tax yea	ar 🕨	N/A
	Unde belief	r penalties of perjury, I declare that I have examined this return, including accompanying scheor, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all inform	lules and mation of	statements which prepa	, and to the best of my knowledge and arer has any knowledge.
Sign		$-\mathbf{h}$			
Here	Signa	ture▶	Date Þ	Mar 3	1, 2019
				D. 11	
	Print	your name ► Darie Urbanky Print/Type preparer's name Preparer's signature	Title ► Date	Presid	ent and Chief Operating Office
Paid	0 46 -				Check if self-employed
Prep Use		Firm's name	·		Firm's EIN ►
000	Juny	Firm's address ►			Phone no.