Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

P	art I Reporting I	lssuer					
1	Issuer's name				2 Issuer's employer identification number (EIN)		
	Cambridge Asset	Allocation Corpo	orate Class	N/A			
3	Name of contact for add	ditional information	4 Telephor	ne No. of contact	5 Email address of contact		
	Duarte Boucinha		416	-681-1752	dboucinha@ci.com		
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, M5C 3G7		
8	Date of action		9 Classification and description				
	Tax Year 2019			Non-taxable dist	ribution		
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)		
	N/A	N/A	1	N/A	N/A		
Р	art II Organizatio	onal Action Attac	ch additiona	I statements if needed. See	back of form for additional questions.		
14	Describe the organiza	tional action and, if a	pplicable, the	e date of the action or the date a	against which shareholders' ownership is measured for		
	the action ►				lders throughout the 2019 taxation year.		
					return of capital that occurred throughout		
_		the 2019 tax	-	i dint information of the I	eturii or capitai mat occurred moughout		
_		uic 2019 taz	table year.				
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15	Describe the quantitat	tive effect of the ora	nizational ac	tion on the basis of the security	in the hands of a U.S. taxpayer as an adjustment per		
	share or as a percenta						
	•	_	о.20370 ре	- unit			
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40	Describe the calculation						
16			asis and the	data that supports the calculation	on, such as the market values of securities and the		
	valuation dates ►	N/A					
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Part	Ш (Organizational Action (conti	nued)			
1 7 Li	ist the	applicable Internal Revenue Code s	ection(s) and subsection(s) upon wh	ich the tax treatment	is based ►	IRC section 301(c)(2), 312 and 316
			NT / A			
С	an any	resulting loss be recognized? ► _	N/A			
						NT / A
Р	rovide	any other information necessary to	implement the adjustment, such as	the reportable tax yea	ır ▶	N/A
			ve examined this return, including accom			
an	beliet	, it is true, correct, and complete. Declara	ation of preparer (other than officer) is bas	ed on all information of v	wnicn preparer	nas any knowledge.
gn ere	Signa	tura •		Date ►	Mar 31,	2019
	Signa			Date		
	Print	your name ► Darie Urbanky	<u> </u>	Title►	Presiden	t and Chief Operating Off
	1 11116	<u>-</u> <u>-</u>				
		Print/Type preparer's name	Preparer's signature	Date		heck if PTIN
	arer Only	Print/Type preparer's name Firm's name ▶	Preparer's signature	Date	Se	heck ☐ if PTIN llf-employed rm's EIN ▶