See separate instructions.

Part Reporting Issuer

Cambridge Asset Allocation Corporate Class (EFT5) 3 Name of contact for additional information 4 Telephone No. of contact Duarte Boucinha 416-681-1752 6 Number and street (or P.O. box if mail is not delivered to street address) of contact 2 Queen Street East, 20th Floor 8 Date of action 9 Tax Year 2019 Non-taxable distrib 10 CUSIP number 11 N/A N/A N/A N/A N/A N/A Part II Organizational Action Attach additional statements if needed. See back the action is the action or the date aga the action is an on-taxable distribution was made to shareholded	Toronto, Ontario, M5C 3G7 oution 13 Account number(s) N/A
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	ck of form for additional questions.
the action A non-taxable distribution was made to shareholde	
	rs throughout the 2019 taxation year.
See question 15 for per unit information of the retu	urn of capital that occurred throughout
the 2019 taxable year.	
15 Describe the quantitative effect of the organizational action on the basis of the security in t share or as a percentage of old basis ► 0.15562 per unit	he hands of a U.S. taxpayer as an adjustment per
16 Describe the calculation of the change in basis and the data that supports the calculation,	such as the market values of securities and the
valuation dates N/A	
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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	Signature			Date Mar 31, 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.		