► See separate instructions.

Ρ	arti Reporting	Issuer					
1	Issuer's name		2 Issuer's employer identification number (EIN)				
	Cambridge Canad	lian Equity Corpo	N/A				
3	Name of contact for ad	ditional information	4 Telephon	e 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				street address) of contact	7 City, town, or post office, state	e, and ZIP code of contact	
	2 Queen Street East, 20th Floor				Toronto, Ontario, M5C 3G7		
8	Date of action		9 Class	ification and description			
	Tax Year 2019			Non-taxable distribution			
10				12 Ticker symbol	13 Account number(s)		
	N/A	N/A		N/A	N/A		
Pa			additional	-	ack of form for additional que	estions.	
14					jainst which shareholders' owner		
	the action ►				ers throughout the 2019 ta		
					turn of capital that occurred		
		the 2019 taxa	1	unit information of the re	turn of capital that occurres		
			ibic year.				
45	Describe the questite	tive offect of the error		ion on the basis of the approximity in	the bands of a LLC townswar as	an adjustment ner	
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 0.37408 per unit						
	share or as a percenta	age of old basis \blacktriangleright _0	.37408 per	unit			
16	Describe the calculati	on of the change in ba	isis and the o	data that supports the calculation	n, such as the market values of se	ecurities and the	
	valuation dates >	N/A					
For	Paperwork Reduction	Act Notice, see the	eparate Ins	tructions.	Cat. No. 37752P	Form 8937 (12-2017)	

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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	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.	