See separate instructions.

Part I Reporting Issuer

	Issuer's name	155061	2 Issuer's employer ide	2 Issuer's employer identification number (EIN)					
		1D: 11-16	NT/A	N/A					
Cambridge Global Dividend Corporate C 3 Name of contact for additional information 4 Tele				(PT5) le No. of contact	5 Email address of contact	ct			
Ū									
Duarte Boucinha				-681-1752	dboucinha@ci.com				
6	Number and street (or P.O. box if mail is not delivered to street address) of contact			street address) of contact	7 City, town, or post office, s	7 City, town, or post office, state, and ZIP code of contact			
	2 Queen Street East, 20th Floor				Toronto, Ontari	Toronto, Ontario, M5C 3G7			
8	Date of action		9 Class	sification and description					
	Tax Year 2019			Non-taxable dis	tribution	bution			
10	O CUSIP number 11 Serial number(s))	12 Ticker symbol	13 Account number(s)				
D,	N/A art II Organizati	N/A		N/A	N/A back of form for additional of	nuestions			
14	-				against which shareholders' ow	-			
14	the action ►				olders throughout the 2019				
		-	-	r unit information of the	return of capital that occur	red throughout			
		the 2019 tax	able year.						
15					in the hands of a U.S. taxpayer	as an adjustment per			
	share or as a percent	tage of old basis ► _0	.58917 per	r unit					
			-						
16	Describe the calculation	ion of the change in ba	asis and the	data that supports the calculat	ion, such as the market values o	f securities and the			
	valuation dates >	N/A							
						- 0007			
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	Cat. No. 37752P	Form 8937 (12-2017)			

Form 89	937 (12-2	2017)			Page 2	
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	Jiny	Firm's address ►			Phone no.	