► See separate instructions.

	Issuer's name	155061	2 Issuer's employer ide	2 Issuer's employer identification number (EIN)				
	6:	Malaca		N/A				
3		ing Markets Corpo		(I) e No. of contact	N/A 5 Email address of conta			
Duarte Boucinha				-681-1752	<u> </u>	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 E	ast, 20th Floor			Toronto, Ontar	io, M5C 3G7		
8	Date of action		9 Class	sification and description				
	Tax Year 2019			Non-taxable dis	stribution	bution		
10	CUSIP number <b>11</b> Serial number(s)		)	12 Ticker symbol	13 Account number(s)			
	NT / A				NT/A			
P	N/A art II Organizati	N/A		N/A	N/A e back of form for additional	questions		
14					against which shareholders' ow	-		
••	the action ►				olders throughout the 2019			
					return of capital that occu			
		the 2019 tax	1		Tetuin of capital that occu			
			abie year.					
16	Describe the quantite	tive offect of the organ	nizational aat	ion on the basis of the acquirit	win the hands of a LLS taxpave	r an an adjustment per		
15		-			y in the hands of a U.S. taxpaye	r as an adjustment per		
	share of as a percent	tage of old basis $\blacktriangleright 0$	.20612 per	runit				
16	Describe the calculation	ion of the change in ba	asis and the	data that supports the calcula	tion, such as the market values o	of securities and the		
	valuation dates >	N/A						
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	Cat. No. 37752P	Form <b>8937</b> (12-2017)		

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Part		Organizational Action (continued)			,	
<b>17</b> L	_ist the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	eatment	is based I	<ul> <li>IRC section 301(c)(2), 312 and 316</li> </ul>	
					512 and 510	
		27/1				
18 (	Can any	v resulting loss be recognized? ►N/A				
<b>19</b> 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	<b>0</b> 46 -				Check if self-employed	
Prep Use		Firm's name	·		Firm's EIN ►	
000	Juny	Firm's address ►			Phone no.	