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	2 Issuer's employer identification number (EIN)					
	Sentry Conservativ	ve Income Portfe	olio (B)		N/A				
3	Name of contact for add	ditional information	4 Telephon	1 Telephone No. of contact		5 Email address of contact			
	Duarte Boucinha		416	416-681-1752		dboucinha@ci.com			
6	Number and street (or P	P.O. box if mail is not	not delivered to street address) of contact			7 City, town, or post office, state, and ZIP code of contact			
	2 Queen Street Ea	ast, 20th Floor				Toronto, Ontario, M5C 3G7			
8	Date of action		9 Classification and description						
	Tax Year 2020			Non-taxable dist		ribution			
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	1:	3 Account number(s)			
	N/A	N/A	1	N/A		N/A			
P					See back				
14		Organizational Action Attach additional statements if needed. See back of form for additional questions. be the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for							
the action A non-taxable distribution was made to shareholders throughout the 2020 taxati									
						of capital that occurred throughout			
		the 2020 tax							
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15	Describe the quantitative effect of the organizational action on the basis of the secur share or as a percentage of old basis ►					hands of a U.S. taxpayer as an adjustment per			
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16	Describe the calculation valuation dates ▶	on of the change in N/A	pasis and the	data that supports the calc	culation, su	ch as the market values of securities and the			
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Par	t II	C	Organizational Action (continued)			· -
17	List	the a	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax tre	eatment is based ▶	IRC section 301(c)(2), 312 and 316
	_					
18	Can	any	resulting loss be recognized? ► N/A	1		
19	Prov	vide a	any other information necessary to impler	nent the adjustment, such as the reportable	e tax vear ►	N/A
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	U	Jnder	penalties of perjury, I declare that I have exan	nined this return, including accompanying sched	ules and statements,	and to the best of my knowledge and
	b			preparer (other than officer) is based on all inform		
Sign Here	.			Manah 21	2020	
пеге	• s	Signature ▶			Date March 31,	2020
	P	Print v	our name ▶ Darie Urbanky	Title ▶ President	and Chief Operating Officer	
Paic			Print/Type preparer's name	Preparer's signature	Date	Check if PTIN
Pre		er│				self-employed
Use			Firm's name			Firm's EIN ▶
Send	Form	n 893	Firm's address ► 37 (including accompanying statements) t	o: Department of the Treasury, Internal Re	venue Service, Oad	Phone no. den, UT 84201-0054