► See separate instructions.

	Issuer's name	Issuer			2 Issuer's employ	er identification number (EIN)		
-								
Lawrence Park Strategic Income Fund (						N/A		
<b>3</b> Name of contact for additional information <b>4</b>			•	e No. of contact	5 Email address of			
	Duarte Boucinha		416	-681-1752	dboucinha@c	i.com		
6 Number and street (or P.O. box if mail is not delive			delivered to s	street address) of contact	7 City, town, or post o	7 City, town, or post office, state, and ZIP code of contact		
	2 Queen Street East, 20th Floor				Toronto, O	ntario, M5C 3G7		
8	Date of action		9 Class	sification and description				
	Tax Year 2019			Non-taxable d	listribution	bution		
10	CUSIP number	11 Serial number(s	)	12 Ticker symbol	13 Account number	(s)		
	N/A	N/A		N/A	N/A			
Pa				-	ee back of form for addition	onal questions.		
14	-					s' ownership is measured for		
	the action ►				nolders throughout the			
		See question	15 for per	r unit information of th	e return of capital that o	occurred throughout		
		the 2019 tax	able year.		-			
15	Describe the quantitat	tive effect of the orga	nizational act	ion on the basis of the secu	rity in the hands of a U.S. tax	payer as an adjustment per		
	share or as a percenta	age of old basis $\blacktriangleright$ (	.24790 per	r unit				
			-					
16	Describe the calculati	on of the change in ba	asis and the	data that supports the calcu	lation, such as the market va	lues of securities and the		
	valuation dates >	N/A						
For	Paperwork Reduction	Act Notice, see the	separate Ins	tructions.	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	Signa	ture▶	Date Þ	Mar 3	1, 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	Jiny	Firm's address ►			Phone no.