► See separate instructions.

Ρ	art Reporting	Issuer							
1	Issuer's name		2 Issuer's employer identification number (EIN)						
Sentry Alternative Asset Income Fund (B)					N/A				
3	Name of contact for add	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 F	P.O. box if mail is not	street address) of contact	7 City, town, or post office, state, and ZIP code of contact					
2 Queen Street East, 20th Floor					Toronto, Ontario, M5C 3G7				
8	Date of action		9 Class	sification and description					
	Tax Year 2019			Non-taxable distr	ibution				
10	CUSIP number	11 Serial number(s	\$)	12 Ticker symbol	13 Account number(s)				
	N/A	N/A		N/A	N/A				
Pa					pack of form for additional questions.				
14	-				gainst which shareholders' ownership is measured for				
14	-								
	the action A non-taxable distribution was made to shareholders throughout the 2019 taxation year.								
		-	-	r unit information of the re	eturn of capital that occurred throughout				
		the 2019 tax	able year.						
15	Describe the quantitat	n the hands of a U.S. taxpaver as an adjustment per							
	share or as a percentage of old basis 0.14737 per unit								
16	Describe the calculation	on of the change in b	asis and the	data that supports the calculatio	n, such as the market values of securities and the				
	valuation dates >	N/A			.,				
		11/11							
_									

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Pa	rt II	Drganizational Action (continued)							
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to	reatment is based	IRC section 301(c)(2),					
				312 and 316					
		/-							
18	Can an	resulting loss be recognized? ► N/A							
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	N/A					
	Unde	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.							
Sigr									
Her	<u> </u>	ture V	Date ▶ Mar 31, 2019						
	Print	your name ► Darie Urbanky		and Chief Operating Officer					
Paie Pre	d parer	Print/Type preparer's name Preparer's signature	Date	Check if self-employed					
	e Only	Firm's name		Firm's EIN ►					
		Firm's address ►		Phone no.					

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054