► See separate instructions.

Pa	arti Reporting	ssuer						
1	Issuer's name		2 Issuer's employe	2 Issuer's employer identification number (EIN)				
Cambridge Global Smaller Companies				rate Class (IT8)	N/A			
3	Name of contact for add	ditional information	4 Telephon	e No. of contact	5 Email address of c	ontact		
	Duarte Boucinha		416-	681-1752	dboucinha@ci	dboucinha@ci.com		
6	Number and street (or F	.O. box if mail is not o). box if mail is not delivered to street address) of contact		7 City, town, or post of	fice, state, and ZIP code of contact		
	2 Queen Street East, 20th Floor				Toronto, Or	Toronto, Ontario, M5C 3G7		
8	Date of action		9 Class	ification and description				
	Tax Year 2019			Non-taxable o	listribution	ribution		
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s	3)		
	NT / A							
P	N/A art II Organizatio	N/A	additional	N/A statements if needed S	ee back of form for addition	nal questions		
14 14	-				te against which shareholders	-		
	the action ►				holders throughout the 2			
					e return of capital that o			
		the 2019 tax			e return of capital that o			
			abie year.					
15	Describe the quantitat	tive effect of the organ	nizational act	ion on the basis of the secu	ritv in the hands of a U.S. taxp	aver as an adjustment per		
	Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis • 0.48708 per unit							
16		Ũ	asis and the o	data that supports the calcu	lation, such as the market valu	ues of securities and the		
	valuation dates \blacktriangleright	N/A						
		• • • • • · · · · · · · · · · · · · · ·				- 0007		
For	Paperwork Reduction	Act Notice, see the	separate Ins	tructions.	Cat. No. 37752P	Form 8937 (12-2017)		

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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	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					Check if self-employed
Prep Use		Firm's name	·		Firm's EIN ►
000	Jiny	Firm's address ►			Phone no.