► See separate instructions.

	art Reporting	Issuer						
1	Issuer's name		2 Issuer's employ	2 Issuer's employer identification number (EIN)				
	Cambridge Month	nly Income Corpo	N/A	N/A				
3	Name of contact for add	ditional information	4 Telephor	e No. of contact	5 Email address of	5 Email address of contact		
Duarte Boucinha			416	-681-1752	dboucinha@c	dboucinha@ci.com		
6 Number and street (or P.O. box if mail is not delivered to street				street address) of contact	7 City, town, or post o	ffice, state, and ZIP code of contact		
15 York Street, 2nd floor					Toronto, C	Toronto, Ontario, M5J 0A3		
8	Date of action		9 Class	sification and description				
	Tax Year 2022			Non-taxable distribution				
10	CUSIP number	11 Serial number(s	5)	12 Ticker symbol	13 Account number	s)		
	N/A	N/A		N/A	N/A			
Pa					ee back of form for additio	onal questions.		
14	-					s' ownership is measured for		
	the action ►				holders throughout the			
					e return of capital that o	2		
		the 2022 tax	-		•			
			•					
15	Describe the quantitat share or as a percenta	-			rity in the hands of a U.S. tax	payer as an adjustment per		
16	Describe the calculation valuation dates ►	on of the change in b $\mathrm{N/A}$	asis and the	data that supports the calcu	lation, such as the market va	ues of securities and the		
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	Cat. No. 37752P	Form <b>8937</b> (12-2017		

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Pa	rt II	Organizational Action (continued)							
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to	reatment is based ▶	►					
				312 and 316					
18	Can an	resulting loss be recognized? $\blacktriangleright$ N/A							
40			1. I	N/A					
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	IN/Λ					
	Und	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							
<u>.</u>		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>		Date March 31, 2022						
	Sign								
	Print	your name Darie Urbanky	Title President	and Chief Operating Officer					
Pai		Print/Type preparer's name Preparer's signature	Date	Check if PTIN					
	a parer			self-employed					
	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