See separate instructions.

Part Reporting Issuer

1	Issuer's name		2 Issuer's employer identification number (EIN) FOREIGNUS					
SEN	NTRY GROWTH AND IN	ICOME FUND						
3	3 Name of contact for additional information 4			e No. of contact	5 Email address of contact			
	ANCISCA JULINDA			(647) 789-2516	fjulinda@sentry.ca			
6	Number and street (or F	P.O. box if mail is not	delivered to s	treet address) of contact	7 City, town, or post office, state, and Zip code of contact			
	BAY STREET, SUITE 2	2700			TORONTO, ONTARIO, CANADA, M5L 1E2			
8	Date of action		9 Class	ification and description				
SEE BELOW PAID A "RETURN OF C					ITAL" DISTRIBUTION			
10	CUSIP number	11 Serial number(5)	12 Ticker symbol	13 Account number(s)			
	N/A	N/A		N/A	N/A			
Pa	art II Organizatio	onal Action Attac	h additional	statements if needed.	See back of form for additional questions.			
14	Describe the organiza	tional action and, if a	date against which shareholders' ownership is measured for					
	the action RETUR	N OF CAPITAL AS F	PART OF DIS	TRIBUTIONS THAT OCC	URRED THROUGHOUT THE 2016 TAXABLE YEAR			
15	Describe the quantitat share or as a percenta	-	nizational act	ion on the basis of the se	curity in the hands of a U.S. taxpayer as an adjustment per			

THE ADJUSTMENT TO A SECURITYHOLDER'S COST BASIS IS AS FOLLOWS:

SERIES A: \$0.00000 PER SECURITY	SERIES O8: \$0.00000 PER SECURITY	
SERIES B: \$0.00000 PER SECURITY	SERIES P: \$0.00000 PER SECURITY	
SERIES B8: \$0.00000 PER SECURITY	SERIES P8: \$0.00000 PER SECURITY	
SERIES F: \$0.00000 PER SECURITY	SERIES PF: \$0.00000 PER SECURITY	
SERIES FT8: \$0.00000 PER SECURITY	SERIES PF8: \$0.00000 PER SECURITY	
SERIES I: \$0.00000 PER SECURITY	SERIES T8: \$0.00000 PER SECURITY	
SERIES O: \$0.10229 PER SECURITY		

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► N/A

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Part		Organizational Action (continued)				· · · · · · · · · · · · · · · · · · ·
		applicable Internal Revenue Code section(s) and subsection(s) upon which the ta	ix treatmer	nt is based	•	
IRC SE	CTION	l 301(c)(2), 312 AND 316				
18 C	an any	resulting loss be recognized? ► N/A				
19 Pi	rovide	any other information necessary to implement the adjustment, such as the report	table tax v	ear ► N/A		
10 11	Iovido		tuble tux y			
	Unde	r penalties of perjury, I declare that I have examined this return, including accompanying sc	chedules and	d statements,	, and to the best	of my knowledge and
		it is true, correct, and complete. Declaration of preparer (other than officer) is based on all in				
Sign						
Here	Signa	ture Comman Mon 7/	Date 🕨	4/12/20)17	
		04				
	Print	your name ► EDWARD MERCHAND	Title ►	CHIEF FI	NANCIAL OFI	
Paid		Print/Type preparer's name Preparer's signature	Date	2047	Check 🖌 if	PTIN
Prepa		GREGORY PAPINKO	4/11/	2017	self-employed	P01452981
Use C	Only	Firm's name		000	Firm's EIN ►	98-0189320
		Firm's address ► 18 YORK STREET, SUITE 2600, TORONTO, ONTARIA, CAN	ADA, M5J	VB2	Phone no.	(416) 863-1133

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