► See separate instructions.

-	art Reporting	155061			2 Issue	er's employer identification number (EIN)			
	Cambridge Canadian Short-Term Bond Pool (I)								
3	Name of contact for add					N/A 5 Email address of contact			
U				Telephone No. of contact					
				416-681-1752		dboucinha@ci.com			
6 Number and street (or P.O. box if mail is not deli			elivered to st	ivered to street address) of contact		7 City, town, or post office, state, and ZIP code of contact			
	2 Queen Street East, 20th Floor				T	oronto, Ontario, M5C 3G7			
8	Date of action		9 Classif	9 Classification and description					
	Tax Year 2020			Non-taxable distribution					
10	CUSIP number	11 Serial number(s)		12 Ticker symbol	13 Accc	punt number(s)			
	N/A	N/A		N/A		N/A			
Pa			additional		See back of form	n for additional questions.			
14	-				-	shareholders' ownership is measured for			
	the action ►					shout the 2020 taxation year.			
See question 15 for per unit information of the return of capital that occurred throughout the 2020 taxable year.									
			Die year.						
15		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 0.06218 per unit							
		<u> </u>	00 - 10 per						
16	Describe the calculati valuation dates ►	on of the change in ba ${ m N/A}$	sis and the da	ata that supports the calcu	ulation, such as th	e market values of securities and the			
For	Paperwork Reduction	Act Notice, see the s	eparate Inst	ructions.	Cat. No. 3775	2P Form 8937 (12-2017)			

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Pa	rt II	Drganizational Action (continued)							
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	reatment is based ▶	►					
				312 and 316					
40	Con on	resulting lass he recognized $\sim N/A$							
18	Can an	resulting loss be recognized? ► N/A							
19	Provide	any other information necessary to implement the adjustment, such as the reportabl	le tax year ►	N/A					
	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 ar 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, 2020						
		your name ► Darie Urbanky Print/Type preparer's name Preparer's signature	Title ► President	and Chief Operating Officer					
Paie	d parer	Print/Type preparer's name Preparer's signature		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