Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Part I Reporting	lssuer						
1 Issuer's name				2 Issuer's employer identification number (EIN)			
See Box 1 of the attached	schedule			N/A			
3 Name of contact for add		4 Telepho	ne No. of contact	5 Email address of contact			
Shannon Taylor			905-331-4242	staylor@portlandic.com			
6 Number and street (or F	P.O. box if mail is not	7 City, town, or post office, state, and ZIP code of contact					
1375 Kerns Road, Suite 10	00	0.01		Burlington, Ontario L7P 4V7			
8 Date of action		9 Clas	sification and description				
See Box 14 of the attached			(9 of the attached	1			
10 CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)			
See Box 10 of schedule	ee Box 10 of schedule See Box 11 of sch		See Box 12 of schedule	See Box 13 of attached schedule			
				back of form for additional questions.			
•			e date of the action or the date	against which shareholders' ownership is measured for			
the action ► See Bo	x 14 of attached scl	nedule					
			tion on the basis of the security	in the hands of a U.S. taxpayer as an adjustment per			
				ion, such as the market values of securities and the 312, and the regulation thereunder. Amounts in excess			
			s in its shares to the extent of				

Par	t II	0	organizational Action (continued)					3				
17	List th	ne a _l	pplicable Internal Revenue Code section	n(s) and subsection(s) upon which the tax	treatmen	t is based ▶	IRC§ 301	(c)(2)				
18	Can a	any r	resulting loss be recognized? ► No									
19	Provid	de a	ny other information necessary to imple	ment the adjustment, such as the reporta	ble tax ye	ear ▶ <u>These</u>	actions are	effective on the				
date	of the	dist	tribution identified in Box 14 of the att	tached schedule.								
		nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and slief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.										
Sign Here		ignature ► "Shannon Taylor" Date ► February 11, 2019										
		Print your name ► Shannon Taylor Title ► Director, Financial Reporting										
Paid	t	Ī	Print/Type preparer's name	Preparer's signature	Date		Check if self-employed	PTIN				
	pare Only		Firm's name ►				Firm's EIN ▶	1				
<u></u>		У⊢	Firm's address ►				Phone no.					
Send	Form	893	7 (including accompanying statements)	to: Department of the Treasury, Internal F	Revenue S	Service, Ogd	len, UT 84201	-0054				