## Form **8937**(December 2011) Department of the Treasury Internal Revenue Service

## Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-2224

internal nevenue				Coo coparato monuo			
Part I	Reporting I	ssuer					
1 Issuer's n	ame			2 Issuer's employer identification number (EIN)			
Sentinel Mult	i-Asset Incom	ne Fund					XX-XXXXXX
3 Name of	contact for add	ditional information	4 Telephone	Telephone No. of contact		5 Email address of contact	
Touchstone I	nvestments			TI-CONTACT@TOL	JCHSTONEINVESTMENTS.COM		
		.O. box if mail is not			office, state, and Zip code of contact		
P.O. Box 987	8					Providence, RI 029	40-8078
8 Date of a			on	1011401160/111627	10 0070		
10/27/2017				classes of shares iss	ued by a sin	gle mutual fund/reg	gulated investment company
10 CUSIP nu	ımber	11 Serial number	s)	12 Ticker symbol	,	13 Account number	er(s)
See Part	II below.			See Part II below.			
		nal Action Atta	ch additional	statements if neede	ed. See bacl	of form for addit	ional questions.
14 Describ	e the organizat	tional action and, if a	applicable, the	date of the action or t	he date again	st which shareholde	ers' ownership is measured for
the action	on ► <u>Followi</u> ı	ng the stub fiscal p	eriod ended (	October 27, 2017, it w	as determine	ed that the Sentine	Multi-Asset Income Fund had
distributed re	eturn of capita	Il of \$95,876 to sha	reholders in e	excess of accumulate	d earnings a	nd net investment	income.
-							
							xpayer as an adjustment per ct per share being applied to
							-DIV is indicated below:
CUSIP	NASDAQ Syr		Fund Nan		Total Amo		Monthly Per Share Amount
				come Fund Class A	\$41,8		•
817270564 817270549	SECMX SMKCX			come Fund Class A	26,1		\$0.000489 0.000402
817270325	SCSIX			come Fund Class C	27,9		0.000402
017270323	JUSIA	Sentineri	nutti-Asset iiti	come i una ciass i	21,7	10 1.4170	0.000320
16 Describ	e the calculation	on of the change in b	pasis and the o	data that supports the	calculation. s	uch as the market v	alues of securities and the
		•					portion of dividends paid by
							The percentage of dividend
		_					class divided by the total
		· ·					y per share amount was
							year divided by 10 monthly
distributions		a somage calculate	a above time:	o are arriadita distilib	ations her si	iare for the entire	your divided by 10 monthly
alon ibations	•						

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 >	316(b)(4) Certain
Distrib	utions	By Regulated Investment Companies in			
40 0					
<b>18</b> C	an any	resulting loss be recognized? ► N/A			
<b>19</b> P	rovide	any other information necessary to implen	nent the adjustment, such as the reportable	e tax year ► N/A	
	T				
	Unde	r penalties of perjury, I declare that I have exam , it is true, correct, and complete. Declaration of	lined this return, including accompanying sched preparer (other than officer) is based on all infor	lules and statements, mation of which prepa	and to the best of my knowledge an rer has any knowledge.
Sign					
Here	Signs	uture ▶	Date ►		
	Joigilio				
	Print	your name ► A signed copy is maintained	I by the issuer.	Title ►	
Paid	•	Print/Type preparer's name	Preparer's signature	Date	Check if PTIN
Prepa	arer				self-employed
Use (		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