

# Report of Organizational Actions Affecting Basis of Securities

▶ See separate instructions.

## Part I Reporting Issuer

<b>1</b> Issuer's name  TRILOGY INTERNATIONAL PARTNERS INC.		<b>2</b> Issuer's employer identification number (EIN)  98-1361786	
<b>3</b> Name of contact for additional information  SCOTT MORRIS		<b>4</b> Telephone No. of contact  (425) 458-5900	<b>5</b> Email address of contact  SCOTT.MORRIS@TRILOGY-INTERNATIONAL.COM
<b>6</b> Number and street (or P.O. box if mail is not delivered to street address) of contact  155 108TH AVE NE, SUITE 400			<b>7</b> City, town, or post office, state, and ZIP code of contact  BELLEVUE, WA 98004
<b>8</b> Date of action  05/12/2017		<b>9</b> Classification and description  COMMON STOCK	
<b>10</b> CUSIP number  89621	<b>11</b> Serial number(s)	<b>12</b> Ticker symbol  TRL	<b>13</b> Account number(s)

## Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.

**14** Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ▶ ON MAY 12, 2017, THE COMPANY MADE A CASH DISTRIBUTION OF \$0.02 CAD PER COMMON SHARE. THE DISTRIBUTION WAS CONSIDERED A NONDIVIDEND DISTRIBUTION FOR U.S. TAX PURPOSES.

**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 ▶ THE BASIS IN THE SECURITY SHOULD BE REDUCED BY \$0.02 CAD PER COMMON SHARE.

**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 ▶ THE BASIS REDUCTION IS EQUAL TO THE AMOUNT OF THE NONDIVIDEND DISTRIBUTION.

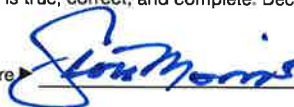
**Part II Organizational Action** (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ SECTION 301(c).

18 Can any resulting loss be recognized? ▶ NO.

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ N/A.

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 belief, 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**  
Signature ▶  Date ▶ 5/14/19  
Print your name ▶ SCOTT MORRIS Title ▶ SENIOR VP, GENERAL COUNSEL

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	NATHAN T. DUFFY		04/30/2019		P01486900
	Firm's name ▶ KPMG LLP			Firm's EIN ▶	13-5565220
	Firm's address ▶ 1918 EIGHTH AVENUE, SUITE 2900, SEATTLE, WA 98101			Phone no.	206-913-4000