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

Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-2224

Part I Reporting I	ssuer		
1 Issuer's name			2 Issuer's employer identification number (EIN)
MAINSTAY CUSHING REN	AISSANCE ADVAN	TAGE FUND	30-6361394
3 Name of contact for add		4 Telephone No. of contact	5 Email address of contact
ANGELA A. TER MAAT 414-287-3013 6 Number and street (or P.O. box if mail is not delivered to street address) of contact			angela.termaat@usbank.com 7 City, town, or post office, state, and Zip code of contact
6 Number and street (or P	.O. DOX II Maii is not	delivered to street address) of contact	7 Oity, town, or post office, state, and zip code of contact
777 EAST WISCONSIN AVI	ENUE 5TH FLOOR		MILWAUKEE, WISCONSIN, 53202
8 Date of action		9 Classification and description	
1/22/2016	l 44 On del avendan	NONTAXABLE RETURN OF CAPITAL (s) 12 Ticker symbol	DISTRIBUTION 13 Account number(s)
10 CUSIP number	11 Serial number	(S) 12 TICKER SYMBOL	13 Account Humber(s)
56064B472, 56064B456 56064B449, 56064B464		CRZAX,CRZCX,CRZZX,CRZ	NX
		ch additional statements if needed. See	back of form for additional questions.
			against which shareholders' ownership is measured for
			ONTAXABLE RETURN OF CAPITAL DISTRIBUTION
			OF THE NONTAXABLE RETURN OF CAPITAL
DISTRIBUTION PAID TO S	HAREHOLDERS O	F RECORD ON 1/21/16 IS 100 PERCENT OF	F THE TOTAL AMOUNT OF DIVIDEND.
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*			
15 Describe the quantitat	tive effect of the ora	anizational action on the basis of the security	in the hands of a U.S. taxpayer as an adjustment per
			APITAL PORTION OF THE DIVIDEND PAID TO
SHAREHOLDERS OF REC	and the state of t		
SHARLHOLDERS OF REC	CORD ON INZINIO	77.5 \$0.14 1 ER 510 W.E.	
4			
40 - 5 9 - 16 1 1-2		having and the data that appropria the coloulat	ion, such as the market values of securities and the
			tion, such as the market values of securities and the
			WERED BY THE PER SHARE AMOUNT OF
\$0.14 REFERENCED ABO	VE. THE RATE WA	S DETERMINED IN ACCORDANCE WITH IF	RC SECTION 301 AND SECTION 316.
	212.000		

art II	Organizational Action (continued)	
List	the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶	IRC 301,316
	any resulting loss be recognized? ► <u>NO LOSS CAN BE RECOGNIZED BY THE SHAREHOLDERS OF R</u> TAXABLE RETURN OF CAPITAL DISTRIBUTION RECEIVED.	ECORD ON 1/21/16 FOR
	vide any other information necessary to implement the adjustment, such as the reportable tax year ▶ <u>THE II</u> VILL BE PROVIDED ON THE SHAREHOLDERS 2016 1099 DIV STATEMENT BOX 3.	NFORMATION PROVIDED
		NFORMATION PROVIDED
OVE		and to the best of my knowledge
BOVE	VILL BE PROVIDED ON THE SHAREHOLDERS 2016 1099 DIV STATEMENT BOX 3. Under penalties of periury. I declare that I have examined this return, including accompanying schedules and statements.	and to the best of my knowledge arer has any knowledge.

Firm's address ▶ Phone no.

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

Firm's EIN ▶

Preparer

Use Only

Firm's name

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			No. of contact	5 Email address of contact	
			*		
ANGELA A. TER MAAT			414-287-3013	angela.termaat@usbank.com	
6 Number and street (or F	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	
777 FACT WILCOONS IN AV	ENUE ETIL EL OOD			MILWAUKEE, WISCONSIN, 53202	
777 EAST WISCONSIN AV 8 Date of action	ENUE STH FLOOR	9 Class	ification and description	IMILWAUKLE, WISCONSIN, 33202	
o balo ol action			NO DESCRIPTION OF THE PROPERTY		
4/22/2016		NONTAX	ABLE RETURN OF CAPITAL DIS	TRIBUTION	
10 CUSIP number	11 Serial number	s)	12 Ticker symbol	13 Account number(s)	
56064B472, 56064B456					
56064B449, 56064B464 Part II Organizatio	anal Action Atta	oh additional	cRZAX,CRZCX,CRZZX,CRZNX	ck of form for additional questions.	
14 Describe the organiza	tional action and if:	annlicable the	date of the action or the date again	inst which shareholders' ownership is measured for	
				AXABLE RETURN OF CAPITAL DISTRIBUTION	
				THE NONTAXABLE RETURN OF CAPITAL	
				HE TOTAL AMOUNT OF DIVIDEND.	
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45 Describe the quantite	tive offeet of the ora	anizational act	ion on the basis of the security in t	the hands of a U.S. taxpayer as an adjustment per	
				AL PORTION OF THE DIVIDEND PAID TO	
SHAREHOLDERS OF REC				THE PORTION OF THE BUILDING THE PORTION OF	
SHAREHOLDERS OF REI	CORD ON 4/21/10 V	7A3 \$0.14 F L1	V SHAKE.		
16 Describe the calculat	ion of the change in	basis and the	data that supports the calculation,	such as the market values of securities and the	
				RED BY THE PER SHARE AMOUNT OF	
				SECTION 301 AND SECTION 316.	

		Hev. 12-2011)	raye 🛌
Pa	rt II	Organizational Action (continued)	
17	List	the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶	IRC 301,316
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			-0000 011 1/04/1/0 500
18		any resulting loss be recognized? NO LOSS CAN BE RECOGNIZED BY THE SHAREHOLDERS OF RE	CORD ON 4/21/16 FOR
THE	NON	TAXABLE RETURN OF CAPITAL DISTRIBUTION RECEIVED.	
			100
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19		vide any other information necessary to implement the adjustment, such as the reportable tax year $ ightharpoonup$ THE IN	IFORMATION PROVIDED
AB	OVE V	VILL BE PROVIDED ON THE SHAREHOLDERS 2016 1099 DIV STATEMENT BOX 3.	
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			744
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_		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements,	and to the best of my knowledge an
		belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which prepared	rer has any knowledge.
Sig	n l	Ω). Γ 1	
He	ro	Signature ▶ / Cook Date ▶ 1/17	1/17
			1 _
		Print your name Kewin Cook Title Assista	at Treasurer
Do	100	Print/Type preparer's name Preparer's signature Date	Check if PTIN
Pa			self-employed
	epai		Firm's EIN ▶
US	- 0	Firm's address ▶	Phone no.
Ser	nd For	m 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogd	len, UT 84201-0054

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Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-2224

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ANGELA A. TER MAAT 414-287-3013 6 Number and street (or P.O. box if mail is not delivered to street address) of contact			angela.termaat@usbank.com 7 City, town, or post office, state, and Zip code of contact	
• Number and Street (or F	.O. DOX II IIIali is flot	delivered to s	sireet address) or contact	7 Oity, town, or post office, state, and 2.p code of somast
777 EAST WISCONSIN AVI	ENUE 5TH FLOOR			MILWAUKEE, WISCONSIN, 53202
8 Date of action		9 Class	ification and description	
7/22/2016	11 Serial number		(ABLE RETURN OF CAPITAL DIS 12 Ticker symbol	TRIBUTION 13 Account number(s)
10 CUSIP number	11 Senai number	S)	12 Ticker Symbol	19 Account number(a)
56064B472, 56064B456 56064B449, 56064B464			CRZAX,CRZCX,CRZZX,CRZNX	
			statements if needed. See bad	ck of form for additional questions.
				inst which shareholders' ownership is measured for
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				THE NONTAXABLE RETURN OF CAPITAL
DISTRIBUTION PAID TO S	HAREHOLDERS OF	RECORD O	N 7/21/16 IS 100 PERCENT OF TH	E TOTAL AMOUNT OF DIVIDEND.
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15 Describe the quantitat	tive effect of the org	anizational act	tion on the basis of the security in t	he hands of a U.S. taxpayer as an adjustment per
				AL PORTION OF THE DIVIDEND PAID TO
SHAREHOLDERS OF REC				
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	7-12-A170-			
16 Describe the calculati	on of the change in	basis and the	data that supports the calculation.	such as the market values of securities and the
				RED BY THE PER SHARE AMOUNT OF
				SECTION 301 AND SECTION 316.
30.14 KELEKENCED ADO	VE. THE KATE WAS	DETERMIN	ED IN ACCORDANCE WITH INC.	SECTION OUT THIS SECTION OF SE
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Form 8937 (Rev. 12-2011)

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8 Date of action		9 Class	ification and description	
10/21/16			ABLE RETURN OF CAPITAL DIS	
10 CUSIP number	11 Serial number	(s)	12 Ticker symbol	13 Account number(s)
56064B472, 56064B456 56064B449, 56064B464			CRZAX,CRZCX,CRZZX,CRZNX	
				ck of form for additional questions.
14 Describe the organiza	tional action and, if	applicable, the	date of the action or the date aga	inst which shareholders' ownership is measured for
the action ► MAINS	TAY CUSHING REN	AISSANCE A	DVANTAGE FUND PAID A NONT	AXABLE RETURN OF CAPITAL DISTRIBUTION
ON 10/21/16 TO SHAREHO	LDERS OF RECOR	D ON 10/20/1	6. THE ESTIMATED PERCENT O	F THE NONTAXABLE RETURN OF CAPITAL
DISTRIBUTION PAID TO S	HAREHOLDERS OF	RECORD O	N 10/20/16 IS 100 PERCENT OF T	HE TOTAL AMOUNT OF DIVIDEND.
15 Describe the quantita	tive effect of the org	anizational ac	tion on the basis of the security in t	the hands of a U.S. taxpayer as an adjustment per
share or as a percenta	age of old basis > T	HE TOTAL N	ONTAXABLE RETURN OF CAPIT	AL PORTION OF THE DIVIDEND PAID TO
SHAREHOLDERS OF REC	CORD ON 10/20/16	WAS \$0.14 PI	ER SHARE.	
				such as the market values of securities and the ERED BY THE PER SHARE AMOUNT OF
				SECTION 301 AND SECTION 316.
\$0.14 REFERENCED ABO	VE. THE RATE WAS	5 DETERIMIN	ED IN ACCORDANCE WITH IRC	SECTION 301 AND SECTION 310.
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Form 89	937 (Rev	. 12-2011)	Page 2
Part		Organizational Action (continued)	
17	List the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶	IRC 301,316
			Arra Arra Arra Arra Arra Arra Arra Arra
	_	W. J.	CODD ON 10/20/10 FOD
		resulting loss be recognized? ► NO LOSS CAN BE RECOGNIZED BY THE SHAREHOLDERS OF RE KABLE RETURN OF CAPITAL DISTRIBUTION RECEIVED.	CORD ON 10/20/16 FOR
THEI	ONTA	ABLE RETURN OF CAPITAL DISTRIBUTION RECEIVED.	
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19	Provide	any other information necessary to implement the adjustment, such as the reportable tax year ▶ THE IN	FORMATION PROVIDED
		BE PROVIDED ON THE SHAREHOLDERS 2016 1099 DIV STATEMENT BOX 3.	
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		AND THE RESIDENCE OF THE PERSON OF THE PERSO	
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_	Und	er penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, a	nd to the best of my knowledge and
	belie	f, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which prepare	er has any knowledge.
Sign		D ()	1.0
Here	Sign	ature Date Date	111
		YOUR DAME KENIN COOK TITLE ASSISTAN	at Treasurer
		Districtive proposition and Preparer's signature	PTIN
Paid		This type property of thems	Check if self-employed
	oarer Only		Firm's EIN ▶
		Firm's address ▶	Phone no.
Send	Form 8	937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogde	en, UT 84201-0054