Form **8937**(December 2017)
Department of the Treasury

Report of Organizational Actions Affecting Basis of Securities

See separate instructions.

OMB No. 1545-0123

Internal Revenue Service	See separate instructions.	
Part I Reporting Issuer		
1 Issuer's name		2 Issuer's employer identification number (EIN)
		, ,
ATC IT - HANCOCK HORTZON DIT	PROTETED INCOME EIND	46-0633089
AIC II - HANCOCK HORIZON DIV 3 Name of contact for additional information	4 Telephone No. of contact	5 Email address of contact
3 Name of contact for additional information	4 Telephone No. of contact	5 Email address of contact
THE HANOCK HORIZON FUNDS	1-800-990-2434	
6 Number and street (or P.O. box if mail is not	delivered to street address) of contact	7 City, town, or post office, state, and ZIP code of contact
ONE FREEDOM VALLEY DRIVE		OAKS, PA 19456
8 Date of action	9 Classification and description	
01/31/2018	NON-TAXABLE RETURN OF C.	ADIMAI DICMDIDIMION
10 CUSIP number 11 Serial num		13 Account number(s)
10 COSII Humber 11 Senamun	iber(3)	73 Account number(s)
SEE LINE 14 BELOW	HHICX, HHIAX, HHIIX	
Part II Organizational Action Attach	additional statements if needed. See bac	k of form for additional questions.
14 Describe the organizational action and, if a	applicable, the date of the action or the date a	gainst which shareholders' ownership is measured for
the action The Hancock Horiz	on Diversified Income Fund	paid a non-taxable return of
capital distribution on 01/31		
percentage of the non-taxable		
record as of 01/29/2018 is 60		-
class given below:	7. 07 0 OI CHE COCAI AMOANCE OI	CHE GIBELIDACION LOT CACH
CUSIP CLASS		
41012R670 INSTITUTIONAL		
41012R662 CLASS A		
41012R654 CLASS C		
15 Describe the quantitative effect of the org	anizational 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 total non-taxable return	of capital portion of the
distribution paid to sharehol		
CUSIP CLASS PER SHARE	14015 01 100014 011 01, 13, 101	0 1145 45 101101151
41012R670 INSTITUTIONAL 0.034	17	
41012R662 CLASS A 0.0328	r /	
41012R654 CLASS C 0.0267		
16 Describe the calculation of the change in	hasis and the data that supports the calcula	tion, such as the market values of securities and the
		on. The rate was determined in
accordance with IRC 301 & 31		on: The late was determined in
accordance with IRC 301 & 31	<u>∪</u>	

		on (continued)						
Part II	Organizational Acti	,						
17 List	the applicable Internal Revo	enue Code section	n(s) and subsection(s) upon which the t	ax treatment is bas	sed 🕨	IRC 301 &	316
		27 - 1	1 1 . 1			T. 7	1 1 1	
18 Can	any resulting loss be recogn	ized? ▶ NOT	applicable t	to this trai	nsaction. N	NO LOS	ss would be	. 1.1
	ized on the return							
	usted to reflect			distributi	on which ma	ay afi	<u>tect realiz</u>	<u>ea</u>
gain o	r loss upon disp	osition of	the shares.					
19 Prov	vide any other information n	ecessary to imple	ment the adjustmen	t, such as the repor	rtable tax year		information	
provid	led herein will be	ecessary to imple e provided	ment the adjustmen to each shar	t, such as the repor reholder on	rtable tax year ▶ their 2018			
provid	wide any other information n led herein will be lent, Box 3.	ecessary to imple e provided	ment the adjustmen to each shar	t, such as the repor reholder on	rtable tax year ▶ their 2018			
provid	led herein will be	ecessary to imple e provided	ment the adjustmen to each shai	t, such as the repor reholder on	rtable tax year ▶ their 2018			
provid	led herein will be	ecessary to imple e provided	ment the adjustmen to each shar	t, such as the repor reholder on	rtable tax year ▶ their 2018			
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provid	led herein will be	ecessary to imple e provided	ment the adjustmen to each shar	t, such as the repor reholder on	rtable tax year ▶ their 2018			
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provid	led herein will be	ecessary to imple e provided	ment the adjustmen to each shar	t, such as the repor reholder on	rtable tax year ▶ their 2018			
provid	led herein will be	ecessary to imple	ment the adjustmen to each shar	t, such as the repor reholder on	rtable tax year ▶ their 2018			
provid	led herein will be	ecessary to imple	ment the adjustmen to each shar	t, such as the repor reholder on	rtable tax year ▶ their 2018			
provid	led herein will be	ecessary to implee provided	ment the adjustmen to each shar	t, such as the repor reholder on	rtable tax year ▶ their 2018			
provid	led herein will be	ecessary to imple	ment the adjustmen to each shar	t, such as the repor reholder on	rtable tax year ▶ their 2018			
provid	led herein will be lent, Box 3.	e provided	to each shar	reholder on	their 2018	3 Form	m 1099 DIV	
provid	Led herein will be lent, Box 3.	e provided eclare that I have ex	to each shar	cluding accompanyin	their 2018	Forn	m 1099 DIV	
provid	led herein will be lent, Box 3.	e provided eclare that I have ex	to each shar	cluding accompanyin	their 2018	Forn	m 1099 DIV	
provid statem	Under penalties of perjury, I d belief, it is true, correct, and co	e provided eclare that I have examplete. Declaration of	camined this return, incomprehensive to each share the s	cluding accompanyin	their 2018	Forn	m 1099 DIV	
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provid statem	Under penalties of perjury, I d belief, it is true, correct, and co	eclare that I have examplete. Declaration on the popy maintained	camined this return, incomprehensive than the state of th	cluding accompanyin	g schedules and stall information of which	Forn	m 1099 DIV	
provid statem	Under penalties of perjury, I d belief, it is true, correct, and co	eclare that I have examplete. Declaration of the ppy maintained	camined this return, incomprehensive of preparer (other than of by issuer	cluding accompanyin	g schedules and stall information of whice	atements, a	m 1099 DIV	
provid statem	Under penalties of perjury, I d belief, it is true, correct, and co	eclare that I have examplete. Declaration of the ppy maintained	camined this return, incomprehensive than the state of th	cluding accompanyin	g schedules and stall information of whice	atements, ash prepare	and to the best of mer has any knowledge.	CFO
provid statem	Under penalties of perjury, I d belief, it is true, correct, and co	eclare that I have examplete. Declaration of the ppy maintained	camined this return, incomprehensive of preparer (other than of by issuer	cluding accompanyin	g schedules and stall information of whice Date Tritle TR	atements, atthements, atthements, atthements, atthements, atthements, attended to the second	and to the best of mer has any knowledge.	CFO
provid statem Sign Here	Under penalties of perjury, I d belief, it is true, correct, and co	eclare that I have examplete. Declaration of the ppy maintained	camined this return, incomprehensive of preparer (other than of by issuer	cluding accompanyin	g schedules and stall information of whice Date Tritle TR	atements, ach prepare	and to the best of mer has any knowledge. R, CONTROLLER, Check if PTIN self-employed	CFO
provid statem	Under penalties of perjury, I d belief, it is true, correct, and co	eclare that I have examplete. Declaration of the ppy maintained	camined this return, incomprehensive of preparer (other than of by issuer	cluding accompanyin	g schedules and stall information of whice Date Tritle TR	atements, at the prepare	and to the best of mer has any knowledge.	CFO

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

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Internal Revenue Service	oce separate instructions.	
Part I Reporting Issuer		
1 Issuer's name		2 Issuer's employer identification number (EIN)
AIC II - HANCOCK HORIZON DI	VERSIFIED INCOME FUND	46-0633089
3 Name of contact for additional information	4 Telephone No. of contact	5 Email address of contact
THE HANOCK HORIZON FUNDS	1-800-990-2434	
6 Number and street (or P.O. box if mail is no	t delivered to street address) of contact	7 City, town, or post office, state, and ZIP code of contact
ONE FREEDOM VALLEY DRIVE		OAKS, PA 19456
8 Date of action	9 Classification and description	
02/28/2018	NON-TAXABLE RETURN OF CA	APITAL DISTRIBUTION
10 CUSIP number 11 Serial nu	mber(s) 12 Ticker symbol	13 Account number(s)
SEE LINE 14 BELOW	HHICX, HHIAX, HHIIX	
Part II Organizational Action Attach	additional statements if needed. See back	of form for additional questions.
the action The Hancock Hori	zon Diversified Income Fund	
	8/2018 to shareholders of red	
	e return of capital distribut	
	0.67% of the total amount of	the distribution for each
class given below:		
CUSIP CLASS		
41012R670 INSTITUTIONAL		
41012R662 CLASS A		
41012R654 CLASS C		
15 Describe the quantitative effect of the or	ganizational action on the basis of the security i	n the hands of a U.S. taxpayer as an adjustment per
share or as a percentage of old basis >	The total non-taxable return	of capital portion of the
-	lders of record on 02/26/2018	3 was as follows:
CUSIP CLASS PER SHARE		
41012R670 INSTITUTIONAL 0.03	/8	
41012R662 CLASS A 0.0363		
41012R654 CLASS C 0.0318		
valuation dates ▶ See line 15 a	bove for per share information	tion, such as the market values of securities and the on. The rate was determined in
accordance with with IRC 301	. & 310	

Part II	7 (Rev. 12-2017) Organizational Action (continued)			
artii	O Samuel Contains			
	(. (6 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	pased IRC 301 8	316
7 List	t the applicable Internal Revenue Code section(s) and subsection(s) upon which	n the tax treatment is t	pased \ \ 1100000000000000000000000000000000000	<u>x 310</u>
o Con	n any resulting loss be recognized?	transaction.	No loss would b	ne
8 Can	nized on the return of capital distribution. Th			
	justed to reflect the return of capital distrib			
	or loss upon disposition of the shares.	ACTON WINTEN	may affect fear.	1200
jain O	or the shares.			
O Prop	vide any other information processory to implement the adjustment such as the	v reportable toy year N	The information	on
9 Provid	ovide any other information necessary to implement the adjustment, such as the	e reportable tax year	The information of the second	
rovid	ded herein will be provided to each shareholder	reportable tax year ▶ on their 20		
rovid	ovide any other information necessary to implement the adjustment, such as the ded herein will be provided to each shareholder ment, Box 3.	reportable tax year ▶ on their 20		
rovid	ded herein will be provided to each shareholder	e reportable tax year on their 20		
rovid	ded herein will be provided to each shareholder	e reportable tax year on their 20		
rovid	ded herein will be provided to each shareholder	e reportable tax year on their 20		
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rovid	ded herein will be provided to each shareholder	e reportable tax year on their 20		
rovid	ded herein will be provided to each shareholder	e reportable tax year on their 20		
rovid	ded herein will be provided to each shareholder ment, Box 3.	on their 20	18 Form 1099 DI	V
rovid	ded herein will be provided to each shareholder	panying schedules and	18 Form 1099 DI	f my knowled
rovid	ded herein will be provided to each shareholder ment, Box 3. Under penalties of perjury, I declare that I have examined this return, including accomp	panying schedules and	18 Form 1099 DI	f my knowled
statem Sign	Under penalties of perjury, I declare that I have examined this return, including accomp belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based	panying schedules and	18 Form 1099 DI	f my knowlec
statem Sign	ded herein will be provided to each shareholder ment, Box 3. Under penalties of perjury, I declare that I have examined this return, including accomp	panying schedules and	18 Form 1099 DI	f my knowlec
statem Sign	Under penalties of perjury, I declare that I have examined this return, including accomp belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based signed copy maintained by issuer	panying schedules and d on all information of w	18 Form 1099 DI	f my knowled
statem Sign	Under penalties of perjury, I declare that I have examined this return, including accomp belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based signed copy maintained by issuer Signature Print your name STEPHEN CONNORS	panying schedules and d on all information of w	18 Form 1099 DI	f my knowled
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accomp belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based signature	panying schedules and d on all information of w	statements, and to the best of hich preparer has any knowled treasurer, Controlled	f my knowled
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accomplete, it is true, correct, and complete. Declaration of preparer (other than officer) is based signature Signature Print your name STEPHEN CONNORS Print/Type preparer's name Preparer's signature	panying schedules and d on all information of w	statements, and to the best of hich preparer has any knowled.	f my knowled
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accomplete, it is true, correct, and complete. Declaration of preparer (other than officer) is based signature Signature Print your name STEPHEN CONNORS Print/Type preparer's name Preparer's signature Preparer's signature	panying schedules and d on all information of w	statements, and to the best o hich preparer has any knowled treasurer, CONTROLLEI Check if self-employed	f my knowled
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accomplete, it is true, correct, and complete. Declaration of preparer (other than officer) is based signature Signature Print your name STEPHEN CONNORS Print/Type preparer's name Preparer's signature Preparer's signature	panying schedules and d on all information of w	statements, and to the best of hich preparer has any knowled treasurer, Controlled Check if P	f my knowled

Department of the Treasury

Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-0123

Internal Revenue Service	See separate instructions.	
Part I Reporting Issuer		·
1 Issuer's name		2 Issuer's employer identification number (EIN)
AIC II - HANCOCK HORIZON DIV	FRSTETED INCOME FIND	46-0633089
3 Name of contact for additional information	4 Telephone No. of contact	5 Email address of contact
• Name of contact for additional information	4 Telephone No. of contact	5 Email address of contact
	1 000 000 0404	
THE HANOCK HORIZON FUNDS	1-800-990-2434	
6 Number and street (or P.O. box if mail is not	delivered to street address) of contact	7 City, town, or post office, state, and ZIP code of contact
ONE FREEDOM VALLEY DRIVE		OAKS, PA 19456
8 Date of action	9 Classification and description	
03/29/2018	NON-TAXABLE RETURN OF C	APITAL DISTRIBUTION
10 CUSIP number 11 Serial num	nber(s) 12 Ticker symbol	13 Account number(s)
SEE LINE 14 BELOW	HHICX, HHIAX, HHIIX	
	additional statements if needed. See bac	k of form for additional questions
		· · · · · · · · · · · · · · · · · · ·
		gainst which shareholders' ownership is measured for
		paid a non-taxable return of
capital distribution on 03/29		
percentage of the non-taxable		
record as of 03/29/2018 is 60	0.67% of the total amount of	the distribution for each
class given below:		
CUSIP CLASS		
41012R670 INSTITUTIONAL		
41012R662 CLASS A		
41012R654 CLASS C		
15 Describe the quantitative effect of the org	anizational action on the basis of the security	in the hands of a U.S. taxpayer as an adjustment per
	The total non-taxable return	
distribution paid to sharehol	ders of record on U3/2//2U1	8 was as Iollows:
CUSIP CLASS PER SHARE		
41012R670 INSTITUTIONAL 0.030)8	
41012R662 CLASS A 0.0292		
41012R654 CLASS C 0.0245		
		tion, such as the market values of securities and the
		on. The rate was determined in
accordance with IRC 301 & 31	6	

7 List	the applicable Internal Revenue C	Code section(s) and subsection(s) upon v	which the tax treatment is I	based ■ IR	C 301 & 316
		3. 13		37 3	
8 Can	any resulting loss be recognized?	Not applicable to this capital distribution.			
		return of capital distr			
	r loss upon disposit	<u>-</u>	IDUCTOR WILLCH	may arrec	t lealized
<u>a111 0</u>	1 1055 apon arsposie	ion of the shares.			
0 Provi				The inf	formation
9 Provid	vide any other information necess ed herein will be pr	ary to implement the adjustment, such as	s the reportable tax year ▶ der on their 20		ormation
rovid	ed herein will be pr	ary to implement the adjustment, such as ovided to each sharehold	s the reportable tax year p der on their 20		
rovid	vide any other information necessa ed herein will be pr ent, Box 3.	ary to implement the adjustment, such as ovided to each sharehold	s the reportable tax year Der on their 20		
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rovid	ed herein will be pr	ary to implement the adjustment, such as ovided to each sharehold	s the reportable tax year der on their 20		
rovid	ed herein will be prent, Box 3.	ovided to each sharehold	der on their 20	18 Form 1	099 DIV
rovid	ed herein will be prent, Box 3.	ovided to each sharehold	der on their 20	18 Form 1	099 DIV
rovid	ed herein will be prent, Box 3.	ovided to each sharehold	der on their 20	18 Form 1	099 DIV
rovid tatem	ed herein will be prent, Box 3. Under penalties of perjury, I declare to belief, it is true, correct, and complete.	hat I have examined this return, including ac Declaration of preparer (other than officer) is	der on their 20	18 Form 1	099 DIV
rovid	ed herein will be prent, Box 3. Under penalties of perjury, I declare to belief, it is true, correct, and complete.	ovided to each sharehold	der on their 20	18 Form 1	099 DIV
rovid	Under penalties of perjury, I declare to belief, it is true, correct, and complete. Signature	hat I have examined this return, including ac Declaration of preparer (other than officer) is low maintained by issuer	companying schedules and based on all information of w	18 Form 1	099 DIV
rovid tatem	Under penalties of perjury, I declare to belief, it is true, correct, and complete. Signature STEPHEN Company STEPHEN Company Print your name STEPHEN Company STEPHEN Compa	hat I have examined this return, including ac Declaration of preparer (other than officer) is low maintained by issuer	companying schedules and based on all information of w	statements, and thich preparer has	o the best of my know any knowledge.
crovid tatem	Under penalties of perjury, I declare to belief, it is true, correct, and complete. Signature	hat I have examined this return, including ac Declaration of preparer (other than officer) is low maintained by issuer	companying schedules and based on all information of w	statements, and thich preparer has	to the best of my know any knowledge.
Sign lere	Under penalties of perjury, I declare to belief, it is true, correct, and complete. Signature Print your name STEPHEN Complete.	hat I have examined this return, including ac Declaration of preparer (other than officer) is low maintained by issuer	companying schedules and based on all information of w	statements, and thich preparer has	o the best of my know any knowledge.
crovid tatem	Under penalties of perjury, I declare to belief, it is true, correct, and complete. Signature Print your name STEPHEN Compared to be print/Type preparer's name	hat I have examined this return, including ac Declaration of preparer (other than officer) is low maintained by issuer	companying schedules and based on all information of w	statements, and thich preparer has	to the best of my know any knowledge.