## AMENDED

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

## Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-0123

➤ See separate instructions.

Part I Reporting Issuer							
1 Issuer's name	2 Issuer's employer identification number (EIN)						
Kinder Morgan Canada Limited		98-1382900					
3 Name of contact for additional information	4 Telephone No. of contact	5 Email address of contact					
Investor Relations	800-315-0578	   KML_IR@Kindermorgancanadalimited.com					
6 Number and street (or P.O. box if mail is no		7 City, town, or post office, state, and ZIP code of contact					
· ·	,						
2700 - 300 5th Avenue SW		Calgary, Alberta T2P 5J2 Canada					
8 Date of action							
See Attached Statement	SERIES 3 PREFERRED SHARES	140 4 1 1 (1)					
10 CUSIP number 11 Serial number	r(s) 12 Ticker symbol	13 Account number(s)					
494549504	KML						
	ach additional statements if needed. See	e back of form for additional questions.					
		e against which shareholders' ownership is measured for					
the action ► See Attached Statement							
15 Describe the quantitative effect of the or	ganizational action on the basis of the securit	ty in the hands of a U.S. taxpayer as an adjustment per					
share or as a percentage of old basis >	N/A						
		:					
·							
	basis and the data that supports the calcula	ation, such as the market values of securities and the					
valuation dates ► <sub>N/A</sub>	· · · · · · · · · · · · · · · · · · ·						
		,					

Part I		Organizational Action (continued,		
			n(s) and subsection(s) upon which the tax treatm	
			TION WHICH IS A DIVIDEND (AS DEFINED UN	
			01 (C)(2), THE PORTION OF THE DISTRIBUTI	ON WHICH IS NOT A DIVIDEND SHALL
BE APP	LIED	AND REDUCE THE ADJUSTED BASIS	OF THE STOCK.	
***************************************				
	***********			
18 Ca	an any	resulting loss be recognized? ► N/A		
***************************************				
***************************************				
<b>19</b> Pr	ovide	any other information necessary to imple	ement the adjustment, such as the reportable tax	x vear ► N/A
			, ,	
	· · · · · · · · · · · · · · · · · · ·	·		
				_
	Unde	r penalties of perjury, I declare that I have exa	mined this return, including accompanying schedules	and statements, and to the best of my knowledge and
	belief	, it is true, correct, and complete. Declaration c	of preparer (other than officer) is based on all information	on of which preparer has any knowledge.
Sign		( ) 4 M	will	1 10 2 2-
Here	Signa	ture >	Date	er to top
				<b>,</b> -
	Print	your name ▶	Title	
Paid		Print/Type preparer's name	Preparer's signature Da	Check if I ''''
Prepa	arer			self-employed
Use C		Firm's name ▶		Firm's EIN ▶
		Firm's address ▶	MANAGEMENT AND RESERVED A STORY OF THE PARTY	Phone no.
Send Fo	orm 89	37 (including accompanying statements)	to: Department of the Treasury, Internal Revenu	ue Service, Ogden, UT 84201-0054

Kinder Morgan Canada Limited Supplemental Attachment to Form 8937 98-1382900

Part II, Question 14:

Detail of the distribution made is described below:

## **Canadian Dollars**

				Taxable	Return of
Declaration		Payable		Dividend	Capital
Date	Record Date	Date	Amount	Amount	Amount
1/16/2019	1/31/2019	2/15/2019	0.325	0.000	0.325
4/30/2019	4/30/2019	5/15/2019	0.325	0.000	0.325
7/31/2019	7/31/2019	8/15/2019	0.325	0.000	0.325
10/31/2019	10/31/2019	11/15/2019	0.325	0.000	0.325