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

Part I Reporting	lssuer							
1 Issuer's name		2 Issuer's employer identification number (EIN)						
DFA FIVE-YEAR GLOBAL	FIXED INCOME FUN	N/A						
3 Name of contact for add		5 Email address of contact						
BRAD STEIMAN			604-685-1633	BRAD.STEIMAN@DIMENSIONAL.COM				
6 Number and street (or F	P.O. box if mail is not	7 City, town, or post office, state, and Zip code of contact						
1500 W. GEORGIA STREE 8 Date of action	T, SUITE 1520	VANCOUVER, BC, V6G 2Z6						
6 Date of action								
SEE BELOW PAID A "RETURN OF CAPITAL" DISTRIBUTION								
10 CUSIP number	11 Serial number(s		12 Ticker symbol	13 Account number(s)				
				,				
N/A	N/A N/A		N/A	N/A				
				ee back of form for additional questions.				
	tional action and, if a	pplicable, the	date of the action or the da	ate against which shareholders' ownership is measured for				
the action ►		***************************************						
RETURN OF CAPITAL AS	PART OF DISTRIBU	TION THAT	OCCURRED ON DECEMBE	ER 17, 2014				
10 1 011 2 2 2 2 2								
				The second secon				
			,					
AP Describes the account to	d							
15 Describe the quantitate share or as a percentar		nizational act	ion on the basis of the secu	rity in the hands of a U.S. taxpayer as an adjustment per				
	_	CT DACIC IC	AC FOLLOWS.					
THE ADJUSTMENT TO A L CLASS F: \$0.04871 PER U		31 BA313 13	AS PULLOWS:					
CLASS I: \$0.09217 PER U								
VARIOU (, WAVOZI /) LIX UNII								
do Danade de alecte	f. bb 1- b-							
16 Describe the calculation dates ►	on of the change in b	asis and the	data that supports the calcu	llation, such as the market values of securities and the				
N/A								
	н							

Form 89		v. 12-2011)			Page 2
Part	Ι .	Organizational Action (contin	ued)		
17 L.i	st the	applicable Internal Revenue Code se	ction(s) and subsection(s) upon which	the tax treatment is based >	
IRC SE	CTION	NS 301(C)(2), 312 AND 316		***************************************	
18 C	an any	y resulting loss be recognized? <a> _			
N/A					
				100-10-1	
				1111000	
19 P	rovide	any other information necessary to in	mplement the adjustment, such as the	reportable tax year 🕨	
N/A					

_			****		
	Unde	er penalties of perjury, I declare that I have	examined this return, including accompa-	nying schedules and statements,	and to the best of my knowledge and
	bellet	f, it is true, correct, and complete. Declaral	tion of preparer (other than officer) is based	on all information of which prepa	irer has any knowledge.
Sign		\bigcirc	- ·	4.0.	1771
Here	Signa	ature >	Marti	Date > WW	18,2015
			·		· -
	Print	your name > DAVID R		Title ► V P &	cfo
Paid		Print/Type preparer's name	Preparer's signature	Date	Check if PTIN
Prepa	arer	RADHIKA PATEL	Lackita Patel	04/08/2015	self-employed P01442465
Use (Firm's name ► ERNST & YOUNG	LLP		Firm's EIN ▶ 98-0092343
	y	Firm's address ► P.O. BOX 251, TD	CENTRE, TORONTO, ONTARIO, C	ANADA, M5K 1J7	Phone no. 416-864-1234
Sand F	orm RC	337 (including accompanying stateme	ents) to: Department of the Treasury I	nternal Payanua Sarvica, Oa	don LIT 94201 00E4