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

## Report of Organizational Actions Affecting Basis of Securities

➤ See separate instructions.

OMB No. 1545-0123

Part I Reporting	ssuer			
1 Issuer's name	***************************************			2 Issuer's employer identification number (EIN)
Guggenheim Credit Alloca	ition Fund	46-2533885		
3 Name of contact for add	ditional information	4 Telephon	e No. of contact	5 Email address of contact
Glenn McWhinnie		312-357-0356	glenn.mcwhinnie@guggenheiminvestments.com	
6 Number and street (or P	.O. box if mail is not	7 City, town, or post office, state, and ZIP code of contact		
227 West Monroe Street, 7	th Floor			Chicago, IL 60606
8 Date of action				
1/15/21			'RETURN OF CAPITAL" DIS	TRIBUTION
10 CUSIP number	11 Serial number(s	s)	12 Ticker symbol	13 Account number(s)
40168G108			GGM	
Part II Organization	onal Action Attac	h additional	statements if needed. Se	e back of form for additional questions.
14 Describe the organizat	tional action and, if a	oplicable, the	date of the action or the dat	e against which shareholders' ownership is measured for
the action ► RETUR	N OF CAPITAL (RO	C) DISTRIBU	TION AS PART OF THE FO	LLOWING DISTRIBUTIONS:
RECORD DATE:		TOTA	L PER SHARE DISTRIBUTI	ON: ROC PER SHARE DISTRIBUTION:
6/15/2020			0.1813000	0.054390
7/15/2020			0.1813000	0.054390
8/14/2020			0.1813000	0.054390
9/15/2020		······································	0.1813000	0.054390
10/15/2020			0.1813000	0.054390
11/13/2020			0.1813000 0.054390	
12/15/2020			0.1813000	0.054390
share or as a percenta  16 Describe the calculatio	ge of old basis ▶ TH	E ABOVE A	CTION WILL REDUCE THE	ty in the hands of a U.S. taxpayer as an adjustment per COST BASIS OF THE SHAREHOLDER'S SECURITY.
valuation dates ► <u>N/A</u>				

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Par	t II	Organizational Action (continued)				
17		ne applicable Internal Revenue Code section		eatment	is based ▶	IRC SECTIONS §312 & §316
18	Can a	ny resulting loss be recognized? ► N/A				
***************************************						- Anna tao di Maria da Cara da
19	Provid	de any other information necessary to imple	ment the adjustment, such as the reportab	le tax yea	ar ▶ <u>N/A</u>	
	······································					
	····					
	be	der penalties of perjury, I declare that I have exa- lief, it is true, correct, and complete. Declaration o	mined this return, including accompanying sche f preparer (other than officer) is based on all infor	dules and mation of	statements, a which prepare	nd to the best of my knowledge and r has any knowledge.
Sig:	<u> </u>	gnature > Dlemwl	u-e	Date ►	1/1	5/21
	Pri	nt your name ► Glenn McWhinnie		Title ►	Assistant T	
Pai	d	Print/Type preparer's name	Preparer's signature	Date		Check if PTIN
Preparei Use Only						Firm's EIN ▶
Conc	LEarm	8037 (including accompanying statements)	to: Department of the Treasury Internal Re	evenue S		