## **FINAL**

## Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-2224

Part I Issuer's name  1 Issuer's name  2 Issuer's employer identification number  NATIONAL CINEMEDIA, INC.  20-5665602  3 Name of contact for additional information  4 Telephone No. of contact  5 Email address of contact  TOM MORRISON  303-792-8793  TOM.MORRISON@NCM.COM  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 or contact  8 Date of action  9 Classification and description  2021 - SEE LINE 14  10 CUSIP number  11 Serial number(s)  12 Ticker symbol  NCMI  Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.  14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured the action  NATIONAL CINEMEDIA, INC. PAYS A QUARTERLY DIVIDEND THE AMOUNTS ARE AS FOLLOWS FOR 2021.  DATE OF RECORD  DIVIDEND AMOUNT  MARCH 22, 2021  \$0.05/SHARE  MAY 21, 2021  \$0.05/SHARE  NOVEMBER 22, 2021  \$0.05/SHARE  NOVEMBER 23, 2021  \$0.05/SHARE  NOVEMBER 24, 2021  \$0.05/SHARE  NOVEMBER 25, 2021  \$0.05/SHARE  NOVEMBER 26, 2021  \$0.05/SHARE  NOVEMBER 28, 2021  \$0.05/SHARE  NOVEMBER 29, 2021  \$0.05/SHARE  NOVEMBER 29, 2021  \$0.05/SHARE  NOVEMBER 20, 2021  \$0.05/SHARE	Internal Rever	nue Service		► See separa	te instructions.			
NATIONAL CINEMEDIA, INC.  3 Name of contact for additional information  4 Telephone No. of contact  5 Email address of contact  TOM MORRISON  303-792-8793  TOM.MORRISON@NCM.COM  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  8 Date of action  9 Classification and description  2021 - SEE LINE 14  10 CUSIP number  11 Serial number(s)  NCMI  Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.  14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured the action ► NATIONAL CINEMEDIA, INC. PAYS A QUARTERLY DIVIDEND THE AMOUNTS ARE AS FOLLOWS FOR 2021.  DATE OF RECORD  DIVIDEND AMOUNT  MARCH 22, 2021  \$0.05/SHARE  MAY 21, 2021  \$0.05/SHARE  MOVEMBER 22, 2021  \$0.05/SHARE  NOVEMBER 22, 2021  \$0.05/SHARE  NOVEMBER 22, 2021  \$0.05/SHARE  NOVEMBER 22, 2021  \$0.05/SHARE  NOVEMBER 22, 2021  \$0.05/SHARE	Part I	Reporting	Issuer				•	
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3 Name of contact for additional information 303-792-8793 TOM.MORRISON 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 co	NATIONAL	L CINEMEDIA,	INC.				20-5665602	
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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	TOM MOR	PISON		303-792-	2703	TOM MORRISONA		
8 Date of action 9 Classification and description  2021 - SEE LINE 14 10 CUSIP number 11 Serial number(s) 12 Ticker symbol 13 Account number(s)  635309107  Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.  14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured the action NATIONAL CINEMEDIA, INC. PAYS A QUARTERLY DIVIDEND THE AMOUNTS ARE AS FOLLOWS FOR 2021.  DATE OF RECORD DIVIDEND AMOUNT MARCH 22, 2021 \$0.05/SHARE MAY 21, 2021 \$0.05/SHARE AUGUST 23, 2021 \$0.05/SHARE NOVEMBER 22, 2021 \$0.05/SHARE NOVEMBER 22, 2021 \$0.05/SHARE  NOVEMBER 22, 2021 \$0.05/SHARE  NOVEMBER 22, 2021 \$0.05/SHARE NOVEMBER 22, 2021 \$0.05/SHARE			P.O. box if mail is not de					
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Part I	Ш	Organizational Action (continued)			
<b>17</b> Li:		applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax	treatment is based ▶	•
IRC 301	(c)(2)	AND IRC 301(c)(3)			
<b>18</b> Ca	an anv	resulting loss be recognized? ► THE TA	AY TDEATMENT OF THE NON TAYAR	I E DISTRIBILITION N	IEEDS TO BE DETERMINED
		AREHOLDER IN CONSULTATION WITH		LL DISTRIBUTION IN	ILLES TO BE DETERMINED
DI LAC	711 511	WEITGEBER IN CONSCENTION WITH	THEIR TAXABUSOR.		
<b>19</b> Pr	rovide	any other information necessary to implen	nent the adjustment, such as the reporta	able tax year ▶	
Sign		penalties of perjury, I declare that I have examit is true, correct, and complete. Declaration of			
Here	Signa	ture ▶		Date ►	
	Jugita	ture ▶		Date	
	Print	/our name ►		Title ►	
Paid		Print/Type preparer's name	Preparer's signature	Date	Check if PTIN self-employed
Prepa		Firm's name			Firm's EIN ▶
Use C	rily	Firm's address ►			Phone no.

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