

**Report of Organizational Actions
 Affecting Basis of Securities**

▶ See separate instructions.

Part I Reporting Issuer

| | | | |
|--|---|---|----------------------|
| 1 Issuer's name Wilmington Intermediate-Term Bond Fund | | 2 Issuer's employer identification number (EIN) 23-2856846 | |
| 3 Name of contact for additional information John C. McDonnell | 4 Telephone No. of contact 1-800-836-2211 | 5 Email address of contact funds@wilmingtontrust.com | |
| 6 Number and street (or P.O. box if mail is not delivered to street address) of contact 1100 North Market Street | | 7 City, town, or post office, state, and Zip code of contact Wilmington, DE 19890 | |
| 8 Date of action April 15, 2013 | 9 Classification and description Regulated Investment Company Stock - Class A shares & Class C shares | | |
| 10 CUSIP number 97181C837 & 97181C852 | 11 Serial number(s) | 12 Ticker symbol MIBCX & GVITX | 13 Account number(s) |

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 for the action ▶ **On April 15, 2013, the Wilmington Intermediate-Term Bond Fund - Class C shares merged into the Wilmington Intermediate-Term Bond Fund - Class A shares in a tax-free exchange under Internal Revenue Code Sec. 368(a).**

Each share of Wilmington Intermediate-Term Bond Fund - Class C shares (CUSIP: 97181C837, Ticker: MIBCX) was exchanged for 1.002175 shares of Wilmington Intermediate-Term Bond Fund - Class A shares (CUSIP: 97181C852, Ticker: GVITX).

15 Describe the quantitative effect of the organizational 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 ▶ **Each shareholder's aggregate basis in the shares of Wilmington Intermediate-Term Bond Fund - Class A received in the exchange will equal their aggregate basis in the shares of Wilmington Intermediate-Term Bond Fund - Class C they surrendered.**

The basis of each Wilmington Intermediate-Term Bond Fund - Class A shares received is equal to 0.9978% of the basis of each Wilmington Intermediate-Term Bond Fund - Class C shares surrendered.

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ▶ **There aggregate basis of the shares received is the same as the aggregate basis of the shares surrendered.**

The net asset value per share of Wilmington Intermediate-Term Bond Fund - Class C shares surrendered in the exchange was \$10.602955. The net asset value per share of Wilmington Intermediate-Term Bond Fund - Class A shares received in the exchange was \$10.579943.

Part II Organizational Action (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ **Internal Revenue Code Sections 354(a), 358(a), 368(a) and 1223(1).**

Blank lines for listing Internal Revenue Code sections.

18 Can any resulting loss be recognized? ▶ **No gain or loss is recognized on the exchange.**

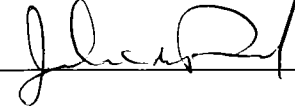
Blank lines for providing information regarding loss recognition.

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ **n/a**

Blank lines for providing other necessary information.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature ▶  Date ▶ May 24, 2013

Print your name ▶ **John C. McDonnell** Title ▶ **Vice President**

| | | | | | |
|-------------------------------|----------------------------|----------------------|------|---|--------------|
| Paid Preparer Use Only | Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
| | Firm's name ▶ | | | | Firm's EIN ▶ |
| | Firm's address ▶ | | | | Phone no. |