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

B	art I Reporting I	Issuer			-				
1	Issuer's name		2 Issuer's employer identification number (EIN)						
	CI G5 20i 2035	5 Q1 Fund (A)	N/A						
3	Name of contact for additional information		4 Telephone No. of contact		5 Email address of contact				
	Duarte Boucinha		416-681-1752		dboucinha@ci.com				
6	Number and street (or F	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				
	2 Queen Street	East, 20th Floo	or		Toronto, Ontario, M5C 3G7				
8	Date of action		9 Clas	ssification and description					
	Tax Year 2015			Non-taxable distrib	ution				
10	CUSIP number	11 Serial number	s)	12 Ticker symbol	13 Account number(s)				
	N/A	N/A		N/A	N/A				
P	Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.								
14	the action A non-taxable distribution was made to shareholders throughout the 2015								
_					nformation of the return of capital				
_		that occur	red throu	ighout the 2015 taxable y	ear.				
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15		Describe the quantitative effect of the organizational action on the basis of the s share or as a percentage of old basis > 0.38117 per unit			the hands of a U.S. taxpayer as an adjustment per				
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16	Describe the calculation	on of the change in ${ m N/A}$	pasis and the	e data that supports the calculation,	such as the market values of securities and the				
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Part		Organizational Action (continued)			
17	List the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatm	ent is based ▶	IRC section 301(c)(2), 312 and 316
18	Can any	resulting loss be recognized? ► N/A	1		
19	Provide	any other information necessary to implem	ent the adjustment, such as the reportable tax	year ▶	N/A
			ned this return, including accompanying schedules or or other than officer) is based on all information		
Sign		000		, , ,	. •
Here	<u> </u>			11/26	/2015
	Signa	uture •	Date	11/20	,
	D., .	your name ► David Pauli	-	COO	
		Print/Type preparer's name	Title Preparer's signature Date		OL L D : PTIN
Paid Prec	arer	Time Type preparer Straine	. Toparor o digitataro		Check if if self-employed
	Only	Firm's name ►			Firm's EIN ▶
	Jy	Firm's address ▶			Phone no.

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