2 Issuer's employer identification number (EIN)

► See separate instructions.

1	Issuer's name	
	CI G5 20i 2036 Q1 Fund (F)	
3	Name of contact for additional information	4

	CI G5 20i 2036 Q	01 Fund (F)	N/A				
			4 Telephon	Telephone No. of contact		5 Email address of contact	
	Duarte Boucinha	Duarte Boucinha 416-		-681-1752		dboucinha@ci.com	
6	Number and street (or P	P.O. box if mail is not	delivered to s	ivered to street address) of contact		7 City, town, or post office, state, and ZIP code of contact	
	2 Queen Street Ea	ust, 20th Floor		Toronto, Ontario, M5C 3G7			
8							
					Non-taxable distribution		
10	CUSIP number	CUSIP number 11 Serial number(s) 12 Ticker symbol			13 Account number(s)		
	N/A	N/A		N/A		N/A	
Ρ	•			-	See bac	k of form for additional questions.	
14	-					nst which shareholders' ownership is measured for	
	the action ►	A non-taxab	le distribut	ion was made to share	holder	rs throughout the 2021 taxation year.	
						rn of capital that occurred throughout	
		the 2021 tax	-				
45	Describe the guartitet	ive offect of the even	ni-otional aat	ion on the basis of the secu	with a log the	es hands of a LLC, townswar as an adjustment par	
15	share or as a percenta				irity iri tr	ne hands of a U.S. taxpayer as an adjustment per	
			1.59009 per	unit			
16	Describe the calculation valuation dates ►	on of the change in b $\mathrm{N/A}$	asis and the o	data that supports the calcu	ulation, s	such as the market values of securities and the	

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Part		Drganizational Action (continued)					
17 L	ist the	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax tre	eatment is based ▶	• <u>IRC section 301(c)(2)</u> , 312 and 316		
18 C	Can any	resulting loss be recognized? N/I	A				
19 P	Provide	any other information necessary to impler	nent the adjustment, such as the reportable	e tax year ►	N/A		
Sign			nined this return, including accompanying schedu preparer (other than officer) is based on all inform				
Here	Signa	ture ►		Date ►			
	Print	our name ► Darie Urbanky			and Chief Operating Officer		
Paid Prepa	arer	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed		
Use (Firm's name ► Firm's address ►			Firm's EIN ► Phone no.		

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