See separate instructions.

Pa	art Reporting I	ssuer					
1	Issuer's name				2 Issuer's employer identification number (EIN)		
	CI G5 20 2040 Q	4 Fund (A)	N/A				
3				e No. of contact	5 Email address of contact		
	Duarte Boucinha			-681-1752	dboucinha@ci.com		
6	Number and street (or P	.O. box if mail is not	delivered to s	street address) of contact	7 City, town, or post office, state, and ZIP code of contact		
	2 Queen Street Ea	st, 20th Floor			Toronto, Ontario, M5C 3G7		
8 Date of action Tax Year 2021			9 Class	sification and description			
				Non-taxable di	ribution		
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)		
	N/A	N/A	Δ	N/A	N/A		
Pa	rt II Organizatio	onal Action Attac	ch additional	statements if needed. Se	e back of form for additional questions.		
14	Describe the organiza	tional action and, if a	applicable, the	e date of the action or the date	e against which shareholders' ownership is measured for		
	the action ►	A non-taxal	ole distribut	tion was made to shareh	olders throughout the 2021 taxation year.		
		See question	n 15 for per	unit information of the	return of capital that occurred throughout		
		the 2021 tax	<u>able year.</u>				
			-				
15	Describe the quantitat share or as a percenta				ty in the hands of a U.S. taxpayer as an adjustment per		
			-				
16	Describe the calculation valuation dates ►	on of the change in $ m k N/A$	basis and the o	data that supports the calcula	tion, such as the market values of securities and the		

Form 89	937 (12-2	017)			Page 2
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