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

Part I Reporting Issuer 2 Issuer's employer identification number (EIN) 1 Issuer's name CI American Equity Corporate Class (OT8) N/A3 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 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 Floor Toronto, Ontario, M5C 3G7 8 Date of action 9 Classification and description Tax Year 2015 Non-taxable distribution 10 CUSIP number 11 Serial number(s) 12 Ticker symbol 13 Account number(s) N/A N/AN/AN/AOrganizational Action Attach additional statements if needed. See back of form for additional questions. Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for A non-taxable distribution was made to shareholders throughout the 2015 taxation year. See question 15 for per unit information of the return of capital that occurred throughout the 2015 taxable year. 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 ► 0.74978 per unit 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 ►

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 ▶
COC Only		Firm's address ▶			Phone no.

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