► See separate instructions.

	arti Reporting	Issuer					
1	Issuer's name				2 Issuer's e	employer identification number (EIN)	
	Signature Canad	lian Bond Corp	oorate Cla	ass (ET8)	1	N/A	
3	Name of contact for add	ditional information	4 Telephor	ne No. of contact	5 Email add	ress of contact	
	Duarte Boucinh	a	416-68	1-1752	dboucinh	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, o	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 Class	9 Classification and description			
	Tax Year 2015			Non-taxable distribution			
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account r	 number(s)	
	N/A	N/A		N/A		N/A	
P	•	-	h additiona	I statements if needed. S			
14	-					eholders' ownership is measured for	
	the action ►			ibution was made to	-		
						of the return of capital	
				ghout the 2015 taxa			
					-		
15	Describe the quantitat	tive effect of the orga	nizational act	tion on the basis of the secu	urity in the hands of a l	J.S. taxpayer as an adjustment per	
	share or as a percenta	age of old basis \blacktriangleright ().46598 p	er unit			
			_				
16	Describe the calculation	on of the change in b	asis and the	data that supports the calc	ulation, such as the ma	arket values of securities and the	
	valuation dates >	N/A					
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	Cat. No. 37752P	Form 8937 (12-2011)	

Form	8937	(Rev. 12-2011)

Pa	t II	Organizational Action (continued)				
17	List the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tre	eatment is based Ⅰ	• I <u>RC section 301(c)(2),</u> 312 and 316	
18	Can an	\prime resulting loss be recognized? \blacktriangleright _ N/ A	A			
19	Provide	any other information necessary to implem	nent the adjustment, such as the reportable	e tax year ►	N/A	
		· · · ·				
	Linde	r penalties of perjury, I declare that I have exami	ined this return including accompanying schedu	ules and statements	and to the best of my knowledge, and	
	belie	, it is true, correct, and complete. Declaration of	preparer (other than officer) is based on all inform	nation of which prepa	arer has any knowledge.	
Sigr		ΛΛΛ				
Her	e Signature ►			Date► 11/26	ate 11/26/2015	
		David Pauli		Title▶ COO		
<u> </u>		your name ► David Pauli Print/Type preparer's name	Preparer's signature	Title► COO Date	Ohanta III if PTIN	
Paie	d parer		-		Check if self-employed	
	e Only	Firm's name			Firm's EIN ►	
-		1			1	

Send Form 8937 (including accompanyi	ng statements) to: Department of the Treas	sury, Internal Revenue Service, Ogden, UT 84201-0054

Phone no.

Firm's address ►