► See separate instructions.

	Issuer's name	155061	2 Issuer's employer id	2 Issuer's employer identification number (EIN)					
			NT/A	N/A					
3		hly Income Corpo		(A15) ne No. of contact	5 Email address of con	tact			
Duarte Boucinha				-681-1752	dboucinha@ci.co				
6	Number and street (or P.O. box if mail is not delivered to street address) of contact			street address) of contact	7 City, town, or post office	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	sification and description					
	Tax Year 2019			Non-taxable d	listribution	bution			
10	CUSIP number 11 Serial number(s)		;)	12 Ticker symbol	13 Account number(s)				
P	N/A art II Organizati	N/A		N/A	N/A ee back of form for additiona	lauestions			
14	-				te against which shareholders' o	-			
••	the action ►				nolders throughout the 201				
					e return of capital that occ				
		the 2019 tax		i unit information of th	e return or capital that oee				
			abie year.						
				the second sector of the second		en en en Producent er en			
15					rity in the hands of a U.S. taxpay	er as an adjustment per			
	share or as a percent	tage of old basis ► (							
16	Describe the calculati	ion of the change in b	asis and the	data that supports the calcul	lation, such as the market values	of securities and the			
10	valuation dates >	N/A			ation, such as the market values	or securities and the			
		11/11							
_									
						0007			
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	Cat. No. 37752P	Form <b>8937</b> (12-2017)			

Form 89	937 (12-2	2017)			Page <b>2</b>	
Part		Organizational Action (continued)			,	
<b>17</b> L	_ist the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	eatment	is based I	<ul> <li>IRC section 301(c)(2), 312 and 316</li> </ul>	
					512 and 510	
		27/1				
18 (	Can any	v resulting loss be recognized? ►N/A				
<b>19</b> F	Provide	any other information necessary to implement the adjustment, such as the reportabl	e tax yea	ar 🕨	N/A	
	Unde belief	r penalties of perjury, I declare that I have examined this return, including accompanying scheor, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all inform	lules and mation of	statements which prepa	, and to the best of my knowledge and arer has any knowledge.	
Sign		$-\mathbf{h}$				
Here	Signature ▶			Date Mar 31, 2019		
				D. 11		
	Print	your name ► Darie Urbanky Print/Type preparer's name Preparer's signature	Title ► Date	Presid	ent and Chief Operating Office	
Paid	<b>0</b> 46 -				Check if self-employed	
Prep Use		Firm's name	·		Firm's EIN ►	
000	Juny	Firm's address ►			Phone no.	