Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Р	art Reporting	Issuer								
1	Issuer's name			2 Iss	2 Issuer's employer identification number (EIN)					
	CI Global Equity	& Income Fund		N/A						
3				Telephone No. of contact		ail address of contact				
	Duarte Boucinha		416-681-1752		db	dboucinha@ci.com				
6	6 Number and street (or P.O. box if mail is not de 2 Queen Street East, 20th Floor			elivered to street address) of contact		7 City, town, or post office, state, and ZIP code of contact				
						Toronto, Ontario, M5C 3G7				
8	Date of action		9 Classification and description							
	Tax Year 2021	Tax Year 2021		Non-taxable dist		tribution				
10	CUSIP number	11 Serial number(s	s)	12 Ticker symbol	13 Ac	count number(s)				
	N/A	N/A	_	N/A		N/A				
P	art II Organizatio	onal Action Attac	h additiona	al statements if needed.	See back of for	rm for additional questions.				
14										
'-	Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► A non-taxable distribution was made to shareholders throughout the 2021 taxation year.									
		See question	15 for pe	er unit information of the	he return of c	capital that occurred throughout				
		the 2021 tax								
Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustance or as a percentage of old basis ► 0.29130 per unit										
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_										
16	Describe the calculativaluation dates ▶	on of the change in b $\mathrm{N/A}$	asis and the	data that supports the calc	ulation, such as	the market values of securities and the				
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_										

47		and the black of the second of		. 4 4 1 - 1 - 1 - 1 - 1 - 1	IDC
17 Li	ist the	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax	treatment is based ▶	
					312 and 316
1 8 C	an anv	resulting loss be recognized? ► N/A	Λ		
	an any				
1 9 P	rovide	any other information necessary to impler	nent the adjustment, such as the reports	able tax vear ▶	N/A
	TOVIGO	any other information necessary to impler	mont the adjustment, such as the report		21/12
	I Im -I	popultion of povium I dealers that I have	nined this veture including a	hadulan and atstance !	and to the heat of my lim and all
		penalties of perjury, I declare that I have exan it is true, correct, and complete. Declaration of			
Sign		-16 ,			
Here	Signa	ture •	Date ►		
	Print	our name ► Darie Urbanky			and Chief Operating Office
Paid		Print/Type preparer's name	Preparer's signature	Date	Check if PTIN
Prepa	arer				self-employed
Use (Only	Firm's name ►			Firm's EIN ▶
		Firm's address ►			Phone no.

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