► See separate instructions.

	Issuer's name	135001	2 Issuer's employer identification number (EIN)					
	CI Mannat Altanna	tivo Absoluto Pot	um Bond	Fund (ETF SHARES)	N/A			
3	Name of contact for ad			e No. of contact	5 Email address of contact			
-	Duarte Boucinha			-681-1752				
						dboucinha@ci.com 7 City, town, or post office, state, and ZIP code of contact		
0	·	r P.O. box if mail is not delivered to street address) of contact						
	15 York Street, 2nd floor				Toronto, Ontario,	M5J 0A3		
8	Date of action 9 0			ification and description				
	Tax Year 2022			Non-taxable dis	tribution			
10	CUSIP number 11 Serial number(s)		s)	12 Ticker symbol	13 Account number(s)			
	N/A	N/A		N/A	N/A			
Pa				-	back of form for additional ques	stions.		
14	-				· · · · · · · · · · · · · · · · · · ·			
	the action \blacktriangleright	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 2022 taxation year.						
					return of capital that occurred			
		the 2022 tax						
15	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 \triangleright 0.09694 per unit							
			-					
16	Describe the calculat	ion of the change in b	asis and the	data that supports the calculat	ion, such as the market values of se	curities and the		
	valuation dates \blacktriangleright	N/A						
For	Paperwork Reduction	Act Notice, see the	separate Ins	tructions.	Cat. No. 37752P	Form 8937 (12-2017)		

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Pa	rt II	Organizational Action (continued)							
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to	reatment is based ▶	►					
				312 and 316					
18	Can an	resulting loss be recognized? \blacktriangleright N/A							
40			1. I	N/A					
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	IN/Λ					
	Und	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and							
<u>.</u>		it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infor	mation of which prepa	arer has any knowledge.					
Sigr Her	<u> </u>		Date March 31, 2022						
	Sign								
	Print	your name Darie Urbanky	Title President	and Chief Operating Officer					
Pai		Print/Type preparer's name Preparer's signature	Date	Check if PTIN					
	a parer			self-employed					
	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