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

| P | art I Reporting I | lssuer | | | | | | | | | |
|--|--|----------------------|---|---------------------------------|--|--|--|--|--|--|--|
| 1 | Issuer's name | | 2 Issuer's employer identification number (EIN) | | | | | | | | |
| | Signature Core | Bond Plus Fun | N/A | | | | | | | | |
| 3 | Name of contact for add | ditional information | 4 Telephor | ne 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 or | | | delivered to | street address) of contact | 7 City, town, or post office, state, and ZIP code of contact | | | | | | |
| | 2 Queen Street | East, 20th Floo | or | | Toronto, Ontario, M5C 3G7 | | | | | | |
| 8 | Date of action | | 9 Class | sification and description | | | | | | | |
| | Tax Year 2017 | | Non-taxable distrib | | ribution | | | | | | |
| 10 | CUSIP number 11 Serial number(| |) 12 Ticker symbol | | 13 Account number(s) | | | | | | |
| | N/A | N/A | | N/A | N/A | | | | | | |
| Р | | | h additiona | | back of form for additional questions. | | | | | | |
| 14 | | | | | | | | | | | |
| • | the action A non-taxable distribution was made to shareholders throughout the 2017 | | | | | | | | | | |
| | | | | | | | | | | | |
| _ | | | | | information of the return of capital | | | | | | |
| _ | | that occur | red throug | ghout the 2017 taxable | e year. | | | | | | |
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| 15 | | | | | in the hands of a U.S. taxpayer as an adjustment per | | | | | | |
| share or as a percentage of old basis ► 0.18457 per unit | | | | | | | | | | | |
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| 16 | valuation dates ► | | asis and the | data that supports the calculat | on, such as the market values of securities and the | | | | | | |
| | valuation dates - | N/A | | | | | | | | | |
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| Par | t II | С | rganizational Action (contin | nued) | | | , , |
|--------------|--------|-------|---|---|---------------------|-------------|---------------------------------------|
| 17 | List t | the a | pplicable Internal Revenue Code s | ection(s) and subsection(s) upon which | the tax treatment | is based ▶ | IRC section 301(c)(2), 312 and 316 |
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| 18 | Can | any | resulting loss be recognized? ► _ | N/A | | | |
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| 19 | Provi | ide a | iny other information necessary to | implement the adjustment, such as the | e reportable tax ye | ar ▶ | N/A |
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| | Uı | nder | penalties of periury. I declare that I have | re examined this return, including accompar | nving schedules and | statements. | and to the best of my knowledge and |
| | | | | ation of preparer (other than officer) is based | | | |
| Sigr Here | ~ I | ianat | | | Data N | Jan 19, | 2018 |
| | | _ | David Pauli | | | EVP | |
| | | | our name ► David Pauli Print/Type preparer's name | Preparer's signature | Title ► Date | EVF | OL L D : PTIN |
| Paid | | | Time Type preparer Strame | Troparor o orginaturo | Date | | Check if self-employed |
| Pre | | | Firm's name | | | | Firm's EIN ▶ |
| Use | . Un | עיי ר | Firm's address ► | | | | Phone no. |
| Send | Form | | | ents) to: Department of the Treasury, li | nternal Revenue S | ervice, Ogd | |