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 I Reporting	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 Telephon	e No. of contact	5 Email address of contact							
	Duarte Boucinha			l-1752	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, 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 Classification and description									
	Tax Year 2017 Non-taxa				distribution							
10	CUSIP number	11 Serial number	s)	12 Ticker symbol	13 Account number(s)							
	N/A	N/A		N/A	N/A							
Ð		nal Action Attac	ch additional									
	Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.											
14	Describe the organiza				ate against which shareholders' ownership is measured for							
	the action $ ightharpoonup$	A non-tax	able distri	bution was made to	shareholders throughout the 2017							
					unit information of the return of capital							
_				shout the 2017 taxa								
		that occur	rea inroug	gnout the 2017 taxa	ble year.							
15	Describe the quantitat	tive effect of the orga	anizational act	ion on the basis of the secu	urity in the hands of a U.S. taxpayer as an adjustment per							
share or as a percentage of old basis ► 0.19843 per unit												
	'	_	отто то р	or unit								
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16			asis and the	data that supports the calci	ulation, such as the market values of securities and the							
	valuation dates ►	N/A										
_												

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
18	Can	any	resulting loss be recognized? ► _	N/A			
							NI / A
19	Provi	ide a	iny other information necessary to	implement the adjustment, such as the	e reportable tax ye	ar ▶	N/A
	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	