► See separate instructions.

	arit Reporting I	ssuer			0 lesuerie emple	ver identification number (FIN)	
1	Issuer's name		2 issuer's emplo	2 Issuer's employer identification number (EIN)			
	CI Select 70i30e N	lanaged Portfolio	N/A	N/A			
3	3 Name of contact for additional information 4 Tel			No. of contact	5 Email address o	5 Email address of contact	
Duarte Boucinha			416-	681-1752	dboucinha@	dboucinha@ci.com	
6 Number and street (or P.O. box if mail is not deliver			lelivered to st	treet address) of contact	7 City, town, or post	7 City, town, or post office, state, and ZIP code of contac	
	15 York Street, 2nd floor			Toronto, On		Ontario, M5J 0A3	
8	Date of action		9 Classi	fication and description			
	Tax Year 2023			Non-taxable distribution			
10	CUSIP number	11 Serial number(s))	12 Ticker symbol	13 Account number	ər(s)	
	N/A	N/A		N/A	N/A		
Pa			n additional		see back of form for addit		
14	-					ers' ownership is measured for	
••	the action ►				holders throughout the		
					ne return of capital that		
		the 2023 taxa		unit information of t	le return or capital that	occurred intolgriout	
			ibie jeur				
15	Describe the quantitat	tive offect of the organ	izational acti	on on the basis of the ass	with in the bands of a LLS to	where as an adjustment per	
15		xpayer as an adjustment per					
	share or as a percenta		.40905 per	unit			
16	Describe the calculation	on of the change in ba	isis and the d	ata that supports the calci	lation, such as the market v	alues of securities and the	
	valuation dates	N/A					
		·					
For	Paperwork Reduction	Act Notice, see the s	eparate Inst	ructions.	Cat. No. 37752P	Form 8937 (12-2017)	

Form 8937 (12-2017) Page 2									
Pa	rt II	Organizational Action (continued)							
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to	reatment is based ▶	IRC section 301(c)(2),					
				312 and 316					
18	Can an	resulting loss be recognized? \blacktriangleright N/A							
	–			NI/A					
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	N/A					
	Und	r penalties of perjury, I declare that I have examined this return, including accompanying sche	dules and statements	, and to the best of my knowledge and					
		belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.							
Sigr Her	<u> </u>		March 31, 2023						
пег	Sign		Date March 31, 2023						
	Drint	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					
	e 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