► See separate instructions.

	art Reporting	ssuer							
1	Issuer's name		2 Issuer's	2 Issuer's employer identification number (EIN)					
	Signature Diver	sified Yield Co		N/A					
3	Name of contact for add	ditional information	4 Telephor	e No. of contact	5 Email add	dress of contact			
	Duarte Boucinh	a	416-68	1-1752	dboucin	ha@ci.com			
6	Number and street (or F	2.0. 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 Floor				Toronto	o, Ontario, M5C 3G7			
8	Date of action		9 Class	sification and description					
	Tax Year 2016			Non-taxable o	listribution	ibution			
10	CUSIP number 11 Serial number(13 Account	number(s)			
	NT / A								
D	N/A art II Organizatio	N/A	h additiona	N/A I statements if needed.		N/A			
14	-					reholders' ownership is measured for			
14	the action ►				-	hroughout the 2016			
						of the return of capital			
			1	ghout the 2016 tax		of the fetuil of capital			
				5					
15	Describe the quantitat	tive offect of the orac	nizational ac	tion on the basis of the sec	ourity in the hands of a	LLS taxpayor as an adjustment per			
15	share or as a percenta				curity in the hands of a	U.S. taxpayer as an adjustment per			
	share of as a percenta		<u>.66018 p</u>	er unit					
16	Describe the calculation	on of the change in h	asis and the	data that supports the cal	culation such as the m	arket values of securities and the			
10	valuation dates >	N/A				and the			
		11/11							
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	Cat. No. 37752P	Form 8937 (12-2011			

Form 8937	(Rev.	12-2011)
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Pa	t II	Organiza	ational Ac	tion (con	tinued)								
17						and subs	section(s)	upon wh	ch the tax	treatment	is based I	IRC sect 312 and	tion 301(c)(2), 316
			·										
18	Can an	ny resulting l	oss be recog	gnized? ►	N/A	L							
19	Provide	e anv other i	information n	acassany ti	o implem	ont the adi	ustment	such as t	he report:	ahla tay va	ar 🕨	N/A	
15	TIOVIU	e any other i	mormation n	iecessary to		ent the auj	ustinent,	Such as		able lax ye	ai 🕨	11/11	
												and to the bes arer has any kno	t of my knowledge and
0:		ei, it is true, co			aration of p	reparer (otri	er than on	cer) is bas		Iornation of	which prepa	arer has any kno	Jwiedge.
Sigr Her				/		_					16/2	/2017	
	Signature ►			/		_ Date ►	10/2	/ 201/					
	Drimi		ne► David Pauli				Title ►	EVP					
		Print/Type	preparer's nan	ne		Preparer's s	ignature			Date		Chock	PTIN
Paie	a parer											Check if self-employed	
	e Only		ie 🕨		I					· · · · · · · · · · · · · · · · · · ·		Firm's EIN ►	
	y												

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

Firm's address ►