► See separate instructions.

P	art Reporting	issuer							
1	Issuer's name		2 Issuer's emplo	2 Issuer's employer identification number (EIN)					
	Select 60i40e M	anaged Portfol	N/A	N/A					
3	Name of contact for add	ditional information	4 Telephor	e No. of contact	5 Email address of	f contact			
	Duarte Boucinh	a	416-68	1-1752	dboucinha@	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 Floc)f		Toronto, On	tario, M5C 3G7			
8	Date of action		9 Class	sification and description					
	Tax Year 2016			Non-taxable di	stribution	oution			
10	CUSIP number	11 Serial number(s	 5)	12 Ticker symbol	13 Account number	 er(s)			
P	N/A art II Organizatio	N/A	h additiona	N/A I statements if needed. S	ee back of form for addi				
14	-					ers' ownership is measured for			
17	the action ►			bution was made to					
				uestion 15 for per u					
				ghout the 2016 taxa					
			ou mou						
45				·····					
15	share or as a percenta				rity in the hands of a U.S. ta	axpayer as an adjustment per			
			<u></u>						
16	Describe the calculati	on of the change in b	asis and the	data that supports the calcu	lation, such as the market v	alues of securities and the			
	valuation dates	N/A							
For	Paperwork Reduction	Act Nation and the	conarata las	tructions	Oct. No. 077500	Form 8937 (12-2011			
FUL	r aper work neuuclion	AULINULUCE, SEE LINE	seharare ius		Cat. No. 37752P				

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/					
	Print your name► 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 ►