► See separate instructions.

Part Reporting	Issuer							
1 Issuer's name		2	2 Issuer's employer identification number (EIN)					
Signature Canadia	an Bond Corporat		N/A					
			elephone 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 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, Ontario, M5C 3G7			
8 Date of action		9 Class	sification and description	ŀ				
Tax Year 2019			Non-taxable d	distributio	ibution			
10 CUSIP number	11 Serial number(s	;)	12 Ticker symbol	13	13 Account number(s)			
N/A	N/A		N/A		N/A			
				See back o	f form for additional questions.			
14 Describe the organiza	ational action and, if a	pplicable, the	e date of the action or the da	ate against	which shareholders' ownership is measured for			
the action ►	A non-taxab	le distribu	tion was made to sharel	holders t	hroughout the 2019 taxation year.			
	See question	15 for pe	r unit information of th	ne return	of capital that occurred throughout			
	the 2019 tax	<u>able year.</u>						
15 Describe the quantita	tive effect of the orga	nizational act	tion on the basis of the secu	rity in the h	ands of a U.S. taxpayer as an adjustment per			
	age of old basis ► (							
	-	asis and the	data that supports the calcu	lation, such	n as the market values of securities and the			
valuation dates $\blacktriangleright$	N/A							

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Part		Organizational Action (continued)			,
<b>17</b> L	_ist the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	eatment	is based I	<ul> <li>IRC section 301(c)(2), 312 and 316</li> </ul>
					512 and 510
		27/1			
18 (	Can any	v resulting loss be recognized? ►N/A			
<b>19</b> F	Provide	any other information necessary to implement the adjustment, such as the reportabl	e tax yea	ar 🕨	N/A
	Unde belief	r penalties of perjury, I declare that I have examined this return, including accompanying scheor, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all inform	lules and mation of	statements which prepa	, and to the best of my knowledge and arer has any knowledge.
Sign		$-\mathbf{h}$			
Here	Signa	ture▶	Date Þ	Mar 3	1, 2019
				D. 11	
	Print	your name ► Darie Urbanky Print/Type preparer's name Preparer's signature	Title ► Date	Presid	ent and Chief Operating Office
Paid	<b>0</b> 46 -				Check if self-employed
Prep Use		Firm's name	·		Firm's EIN ►
000	Juny	Firm's address ►			Phone no.