► See separate instructions.

Ρ	art i Reporting	Issuer						
1	Issuer's name		2 Issuer's employer i	2 Issuer's employer identification number (EIN)				
	Signature Diversif	fied Yield Corpor	ate Class (I	E T8)	N/A			
				e No. of contact	5 Email address of con	5 Email address of contact		
Duarte Boucinha			416	-681-1752	dboucinha@ci.co	dboucinha@ci.com		
6 Number and street (or P.O. box if mail is not delive				street address) of contact	7 City, town, or post office	7 City, town, or post office, state, and ZIP code of contact		
	2 Queen Street East, 20th Floor				Toronto, Onta	rio, M5C 3G7		
8	Date of action		9 Class	sification and description				
	Tax Year 2019			Non-taxable distribution				
10			<u> </u>	12 Ticker symbol	13 Account number(s)			
D	N/A art II Organizatio	N/A		N/A	N/A ee back of form for additiona	Iguationa		
14					e against which shareholders' c			
14	the action ►				olders throughout the 201			
		the 2019 tax		r unit information of the	e return of capital that occ	urred infougnout		
			abie year.					
15	Describe the questite	tive offect of the orac	nizational act	ion on the basis of the secur	ity in the hands of a LLS taynov	or as an adjustment per		
15		-			ity in the hands of a U.S. taxpay	er as an aujustment per		
	share or as a percenta		J.35/94 pe	runit				
16		-	asis and the	data that supports the calcul	ation, such as the market values	of securities and the		
	valuation dates	N/A						
F :	Demonstrate De des "	A -4 No.41			0.1.11.077777	Form 8937 (12-2017		
⊢or	Paperwork Reduction	Act Notice, see the	separate ins	structions.	Cat. No. 37752P	Form 0931 (12-2017)		

Form 89	937 (12-2	2017)			Page 2	
Part		Organizational Action (continued)			,	
17 L	_ist the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	eatment	is based I	 IRC section 301(c)(2), 312 and 316 	
					512 and 510	
		27/1				
18 (Can any	v resulting loss be recognized? ►N/A				
19 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	Signature ▶			Date Mar 31, 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	0 46 -				Check if self-employed	
Prep Use		Firm's name	·		Firm's EIN ►	
000	Jiny	Firm's address ►			Phone no.	