► See separate instructions.

P	art Reporting	ssuer								
1	Issuer's name		2 Issuer's emp	2 Issuer's employer identification number (EIN)						
	Select 50i50e Man	aged Portfolio Co	N/	N/A						
3	Name of contact for add	ditional information	4 Telephor	Telephone No. of contact		s of contact				
Duarte Boucinha			416	416-681-1752		dboucinha@ci.com				
6 Number and street (or P.O. box if mail is not delivered				street address) of contact	7 City, town, or p	ost office, state, and ZIP code of contact				
	2 Queen Street East, 20th Floor				Toronto	, Ontario, M5C 3G7				
8	Date of action		9 Classification and description							
	Tax Year 2019			Non-taxable d	stribution	ribution				
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account num	iber(s)				
				NI/A	N	/ A				
Pa	N/A art II Organizatio	N/A		N/A I statements if needed. Se	e back of form for ad					
14	-					olders' ownership is measured for				
17	the action ►				-					
	the action A non-taxable distribution was made to shareholders throughout the 2019 taxation year. See question 15 for per unit information of the return of capital that occurred throughout the 2019 taxable year.									
			-							
15	Describe the quantitat	Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per								
	share or as a percenta	-				taxpayer as an adjustment per				
			<u></u>	i unit						
16	Describe the calculation	on of the change in b	asis and the	data that supports the calcula	tion, such as the marke	t values of securities and the				
	valuation dates >	N/A								
		,								
						5 0027 (10 0017)				

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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	e _{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	Juny	Firm's address ►			Phone no.	