► See separate instructions.

P	art Reporting	Issuer									
1	Issuer's name		2	2 Issuer's employer identification number (EIN)							
	Select 80i20e Man	aged Portfolio Co		N/A							
3	Name of contact for add	ditional information	4 Telephor	e No. of contact	5	Email address of contact					
Duarte Boucinha			416	416-681-1752		dboucinha@ci.com					
6 Number and street (or P.O. box if mail is not delivered to				o street address) of contact		7 City, town, or post office, state, and ZIP code of contact					
	2 Queen Street Ea	ast, 20th Floor		Toronto, Or		Toronto, Ontario, M5C 3G7					
8	Date of action		9 Classification and description		ľ						
	Tax Year 2019			Non-taxable distr		ribution					
10	CUSIP number	11 Serial number(s)	12 Ticker symbol		Account number(s)					
						27/4					
D,	N/A art II Organizatio	N/A		N/A		N/A of form for additional questions.					
14						which shareholders' ownership is measured for					
17	the action ►	hroughout 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 share or as a percenta	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									
40	Describe the ended of	and the shares in the				han the second standard of the second the					
16	valuation dates	on of the change in ba ${ m N/A}$	asis and the	data that supports the calcul	liation, suc	h as the market values of securities and the					
		11/11									
		• • • • •									

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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	Signa	ture▶	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.	