Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

P	art I Reporting I	ssuer									
1	Issuer's name		2 Issuer's employer identification number (EIN)								
	CI Money Market	Class (F)	N/A								
3	3 Name of contact for additional information 4			ne No. of contact	5 Email address of contact						
	Duarte Boucinha		416	5-681-1752	dboucinha@ci.com						
6	Number and street (or P	O.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 Ea	ıst, 20th Floor		Toronto, Ontario, M5C 3G7							
8	8 Date of action			sification and description							
	Tax Year 2019		ibution								
10	CUSIP number 11 Serial number(s)		s)	12 Ticker symbol	13 Account number(s)						
	N/A	N/A		N/A	N/A						
Þ	<u> </u>			<u> </u>	<u> </u>						
_	Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.										
14	Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for										
	the action A non-taxable distribution was made to shareholders throughout the 2019 taxation year.										
_				r unit information of the retu	ırn of capital that occurred throughout						
		the 2019 tax	<u>xable year.</u>								
_											
_											
Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as a share or as a percentage of old basis ► 0.00236 per unit											
_											
16	Describe the calculation valuation dates ►	on of the change in to N/A	pasis and the	data that supports the calculation,	such as the market values of securities and the						
_											
_											

Par	t II		Organizational Action (continued)			· · ·
17	List	the a	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax tr	eatment is based ▶	IRC section 301(c)(2), 312 and 316
	_					
18	Can	any	resulting loss be recognized? ► N/A	1		
19	Prov	vide a	any other information necessary to implen	nent the adjustment, such as the reportabl	e tax vear ▶	N/A
	1 10	vide (any other information necessary to implem	non the adjustment, such as the reportable		11/11
		Inder	panalties of parium. I declare that I have even	nined this return, including accompanying scheo	lules and statements	and to the hest of my knowledge and
				preparer (other than officer) is based on all infor		
Sigr						
Her		Signat	ure •	Date ► Mar 31, 2	019	
		Dudier ±	our name ▶ Darie Urbanky	Title ▶ President and Chief Operating Officer		
Paid		rint y	Print/Type preparer's name	Preparer's signature	Date	Check if PTIN
Pre		er				self-employed
Use			Firm's name ►			Firm's EIN ▶
			Firm's address 27 (including accompanying statements) t	or Department of the Treasure Leteral De	vonuo Comitee Com	Phone no.
Send	LOW	11 09	or uncluding accompanying statements) t	o: Department of the Treasury, Internal Re	vertue Service, Ugo	Jon, OT 04201-0004