► See separate instructions.

P	Reporting I	Issuer					
1	Issuer's name		2 Issuer's employ	2 Issuer's employer identification number (EIN)			
	Signature Corpora	ate Bond Class (E)	N/A	N/A			
				e No. of contact	5 Email address of	5 Email address of contact	
			416-	681-1752	dboucinha@	dboucinha@ci.com	
6 Number and street (or P.O. box if mail is not deliver				treet address) of contact	7 City, town, or post	7 City, town, or post office, state, and ZIP code of contact	
	2 Queen Street East, 20th Floor				Toronto, C	Ontario, M5C 3G7	
8	Date of action		9 Class	ification and description			
	Tax Year 2019			Non-taxable distribution			
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account numbe	r(s)	
	N/A	N/A		N/A	N/A		
Pa			n additional	-	See back of form for additi	onal questions.	
14	-					ers' ownership is measured for	
	the action ►				holders throughout the		
					ne return of capital that		
		the 2019 taxa	-		1		
15	Describe the quantitat share or as a percenta	xpayer as an adjustment per					
16			usis and the o	data that supports the calcu	ulation, such as the market va	alues of securities and the	
	valuation dates \blacktriangleright	N/A					
For	Paperwork Reduction	Act Notice, see the	separate Ins	tructions.	Cat. No. 37752P	Form 8937 (12-2017)	

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Pa	rt II	Drganizational Action (continued)							
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to	reatment is based	IRC section 301(c)(2),					
				312 and 316					
		/-							
18	Can an	resulting loss be recognized? ► N/A							
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	N/A					
	Unde	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.							
Sigr			mation of which prope	are has any knowledge.					
Her	<u> </u>	ture V	Date ▶ Mar 31, 2019						
	Print	your name ► Darie Urbanky		and Chief Operating Officer					
Paie Pre	d parer	Print/Type preparer's name Preparer's signature	Date	Check if self-employed					
	e Only	Firm's name		Firm's EIN ►					
		Firm's address ►		Phone no.					

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054