► See separate instructions.

		Issuer			2 Issuaris amployar	identification number (EIN)		
1 Issuer's name					2 issuer's employer	2 Issuer's employer identification number (EIN)		
Signature Floating Rate Income Fund (I					N/A			
3	Name of contact for add	ditional information	4 Telephon	e No. of contact	5 Email address of cor	ntact		
	Duarte Boucinha		416-	681-1752	dboucinha@ci.c	om		
6 Number and street (or P.O. box if mail is not delive			delivered to s	treet address) of contact	7 City, town, or post offic	7 City, town, or post office, state, and ZIP code of contact		
	2 Queen Street East, 20th Floor				Toronto, Ontario, M5C			
8	Date of action		9 Class	ification and description				
	Tax Year 2020			Non-taxable d	listribution	ribution		
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)			
		NT/A			NI/A			
Pa	N/A art II Organizatio	N/A	additional	N/A statements if needed. Se	N/A ee back of form for additiona	al questions		
14	-				te against which shareholders'			
17	the action ►				nolders throughout the 20.			
					e return of capital that occ			
		the 2020 taxa			• Totalli of ouplaid diat of	<u>milea anongione</u>		
			,					
15	Describe the quantitat	tive offect of the orac	vizational act	ion on the basis of the secu	ity in the hands of a U.S. taxpa	vor as an adjustment per		
15	Describe the quantitative effect of the organizational action on the basis of the share or as a percentage of old basis \triangleright 0.25211 per unit				ity in the hands of a 0.3. taxpa	yer as an aujustment per		
			.25211 per	unit				
16		-	asis and the o	data that supports the calcul	ation, such as the market value	s of securities and the		
	valuation dates	N/A						
For	Paperwork Reduction	Act Notice and the	onarata lea	tructions		Form 8937 (12-2017		
FUL	r aperwork neulolion	ALL NULICE, SEE LITE S	eparate ins		Cat. No. 37752P			

Form	8937 (12-	017)		Page 2
Pa	rt II	Drganizational Action (continued)		
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	reatment is based ▶	►
				312 and 316
40	Con on	resulting lass he recognized $\sim N/A$		
18	Can an	resulting loss be recognized? ► N/A		
19	Provide	any other information necessary to implement the adjustment, such as the reportabl	le tax year ►	N/A
	Und	r penalties of perjury, I declare that I have examined this return, including accompanying scheo it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infor	dules and statements mation of which prepa	, and to the best of my knowledge and arer has any knowledge.
Sigr		-+		
Her	<u> </u>		Date March 31, 2020	
		your name ► Darie Urbanky Print/Type preparer's name Preparer's signature	Title ► President	and Chief Operating Officer
Paie	d parer	Print/Type preparer's name Preparer's signature		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