► See separate instructions.

Penorting Issuer

For Paperwork Reduction Act Notice, see the separate Instructions.

	Issuer's name	155061	2 Issuer's employe	2 Issuer's employer identification number (EIN)				
	Sum amore Clabel C		NI/A					
Synergy Global Corporate Class (OT8) 3 Name of contact for additional information 4 Telephor				e No. of contact	5 Email address of contact			
•				-681-1752				
Duarte Boucinha						dboucinha@ci.com 7 City, town, or post office, state, and ZIP code of contact		
0	Jumber and street (or P.O. box if mail is not delivered to street address) of contact							
	2 Queen Street East, 20th Floor				Toronto, Or	ntario, M5C 3G7		
8	Date of action		9 Class	sification and description				
	Tax Year 2020			Non-taxable d	listribution	ribution		
10	CUSIP number 11 Serial number(s)		s)	12 Ticker symbol	13 Account number(s	13 Account number(s)		
	N/A	N/A	١	N/A	N/A			
Pa				· · · · · ·	ee back of form for additio	nal questions.		
14	Describe the organiza				te against which shareholders			
	the action ►				nolders throughout the 2	· · · · · · · · · · · · · · · · · · ·		
		-		r unit information of th	e return of capital that o	ccurred throughout		
		the 2020 tax	<u>able year.</u>					
15	Describe the quantita	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 percent	-	0.08168 pe					
			_					
16	Describe the calculati	on of the change in b	basis and the	data that supports the calcul	lation, such as the market val	ues of securities and the		
	valuation dates >	N/A						
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	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 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	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge ar 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		-+							
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