► See separate instructions.

	Issuer's name	Suer			2 Issuer's employe	r identification number (EIN)		
	Select 60:40e Man	ared Portfolio Co	N/A	N/A				
3	Select 60i40e Managed Portfolio Corpo 3 Name of contact for additional information 4 T			No. of contact		5 Email address of contact		
	Duarte Boucinha			681-1752				
						dboucinha@ci.com		
6	Number and street (or F	umber and street (or P.O. box if mail is not delivered to street address) of contac			7 City, town, or post of	7 City, town, or post office, state, and ZIP code of contact		
	2 Queen Street East, 20th Floor				Toronto, Or	ntario, M5C 3G7		
8	Date of action		9 Classi	fication and description				
	Tax Year 2020			Non-taxable distribution				
10	CUSIP number	11 Serial number(s)	,	12 Ticker symbol	13 Account number(s	3)		
D,	N/A art II Organizatio	N/A	additional	N/A	N/A See back of form for addition	nal questions		
14					ate against which shareholders	-		
••	the action ►		•		holders throughout the 2	-		
					ne return of capital that o			
		the 2020 taxa	ible year.					
15	Describe the quantitat	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 percentage of old basis $\blacktriangleright$ 0.25357 per unit								
16	Describe the calculation	on of the change in ba	isis and the d	ata that supports the calcu	ulation, such as the market valu	les of securities and the		
	valuation dates	N/A						
For	<b>Paperwork Reduction</b>	Act Notice, see the s	eparate Inst	ructions.	Cat. No. 37752P	Form <b>8937</b> (12-2017		

Form	8937 (12-	017)		Page <b>2</b>					
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 an 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