## 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	Part I Reporting Issuer									
1	Issuer's name			2 Issuer's employer identification number (EIN)						
	CI G5   20i 2036 Q	22 Fund (F)	N/A							
3				ne No. of contact	5 Email address of contact					
	Duarte Boucinha		416	5-681-1752	dboucinha@ci.com					
6	6 Number and street (or P.O. box if mail is not delive			street address) of contact	7 City, town, or post office, state, and ZIP code of contact					
	2 Queen Street East, 20th Floor				Toronto, Ontario, M5C 3G7					
8	8 Date of action		9 Clas	sification and description						
Tax Year 2021 Non-taxable				Non-taxable distrib	oution					
10	CUSIP number 11 Serial number(s)		s)	12 Ticker symbol	13 Account number(s)					
	N/A	N/A		N/A	N/A					
P	Part II Organizational Action Attach additional statements if needed. See back of form for additional ques				<u> </u>					
_	<del>-</del>									
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 2021 taxation year.									
_				er unit information of the retu	ırn of capital that occurred throughout					
_		the 2021 tax	able year.							
15		the hands of a U.S. taxpayer as an adjustment per								
share or as a percentage of old basis ▶ 0.38298 per unit										
_										
16	Describe the calculation valuation dates ►	on of the change in $N/A$	asis and the	data that supports the calculation,	such as the market values of securities and the					
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_										
_										

47		and the black of the second of	/A		IDC
<b>17</b> Li	ist the	applicable Internal Revenue Code section	n(s) and subsection(s) upon which the tax treatment is based		
					312 and 316
1 <b>8</b> C	an anv	resulting loss be recognized? ► N/A	Λ		
	an any				
1 <b>9</b> P	rovide	any other information necessary to impler	nent the adjustment, such as the reports	able tax vear ▶	N/A
	TOVIGO	any other information necessary to impler	mont the adjustment, such as the report		21/12
	I Im -I	popultion of povium I dealers that I have	nined this veture including a	hadulan and atstance !	and to the heat of my lim
		penalties of perjury, I declare that I have exan it is true, correct, and complete. Declaration of			
Sign		<del>-16</del> ,			
Here	Signa	ture •	Date ►		
	Print	our name ► Darie Urbanky			and Chief Operating Office
Paid		Print/Type preparer's name	Preparer's signature	Date	Check if PTIN
Prepa	arer				self-employed
Use (	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