See separate instructions.

Part I Reporting Issuer

	ант перотину	issuer							
1	Issuer's name			2 Issuer's employer identification number (EIN) ${ m N}/{ m A}$					
	CI Global Bond (Corporate Class (I							
3	Name of contact for ad	4 Telephon	e No. of contact		5 Email address of contact				
Duarte Boucinha 4				416-681-1752		dboucinha@ci.com			
6	Number and street (or P.O. box if mail is not delivered to 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	Date of action		9 Class	9 Classification and description					
	Tax Year 2021			Non-taxable dist		ribution			
10	CUSIP number	11 Serial number(s	\$)	12 Ticker symbol		13 Account number(s)			
	N/A	N/A		N/A		N/A			
Pá					See bac	k of form for additional questions.			
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. See question 15 for per unit information of the return of capital that occurred throughout the 2021 taxable year.								
15	Describe the quantita share or as a percenta	-			urity in th	e hands of a U.S. taxpayer as an adjustment per			
16	Describe the calculati valuation dates ►	on of the change in b $\mathrm{N/A}$	asis and the	data that supports the calc	ulation, s	such as the market values of securities and the			

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Part		Drganizational Action (continued)			
17 L	ist the	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax tre	eatment is based ▶	• <u>IRC section 301(c)(2)</u> , 312 and 316
18 C	Can any	resulting loss be recognized? N/I	A		
19 P	Provide	any other information necessary to impler	nent the adjustment, such as the reportable	e tax year ►	N/A
Sign			nined this return, including accompanying schedu preparer (other than officer) is based on all inform		
Here				Date►	
	Print	our name ► Darie Urbanky			and Chief Operating Officer
Paid Prepa	arer	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed
Use (Firm's name ► Firm's address ►			Firm's EIN ► Phone no.

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