See separate instructions.

## Part Reporting Issue

	Issuer's name	issuer	2 Issuer's employer in	2 Issuer's employer identification number (EIN) N/A 5 Email address of contact				
		Company Cla						
3	CI Global Resour							
Ū				e No. of contact -681-1752				
Duarte Boucinha						dboucinha@ci.com		
6	Number and street (or H	per and street (or P.O. box if mail is not delivered to street address) of contact			7 City, town, or post office	7 City, town, or post office, state, and ZIP code of contact		
	2 Queen Street Ea	ast, 20th Floor			Toronto, Onta	Toronto, Ontario, M5C 3G7		
8	Date of action			sification and description				
	Tax Year 2021			Non-taxable d	listribution	ibution		
10	CUSIP number <b>11</b> Serial number(s)		5)	12 Ticker symbol 13 Account numb				
	N/A	N/A		N/A	N/A			
Pa		-			ee back of form for additiona	l questions.		
14	-				te against which shareholders' o	-		
	the action ►	A non-taxab	le distribut	tion was made to share	holders throughout the 202	1 taxation year.		
					e return of capital that occ			
		the 2021 tax	-		e return or suprai and ove			
			usie jeur					
15	Describe the quantita	tive effect of the orag	nizational act	ion on the basis of the secu	rity in the hands of a U.S. taxpay	er as an adjustment per		
15	share or as a percent	-			nty in the hands of a 0.5. taxpay	er as an aujustment per		
	share of as a percent		J.04015 per	r unit				
16	Describe the colouist	on of the change in h	acia and the	data that augments the colour	lation and as the market values	of accuritics and the		
16	valuation dates ►	-	asis and the	uata that supports the calcu	lation, such as the market values	or securities and the		
		N/A						
	Paperwork Reduction	Act Notice see the	conorato Inc	tructions	Cat. No. 37752P	Form <b>8937</b> (12-2017)		

Form 89	937 (12-2	017)			Page <b>2</b>
Part		Drganizational Action (continued)			
<b>17</b> 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
<b>18</b> C	Can any	resulting loss be recognized? N/I	A		
<b>19</b> 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