► See separate instructions.

Ρ	art Reporting	Issuer					
1	Issuer's name		2 Issuer's employer identification number (EIN)				
	CI Canadian Inco	me & Growth Co	N/A				
3	Name of contact for ad	ditional information	4 Telephon	e No. of contact	5 Email address of contact	5 Email address of contact	
Duarte Boucinha			416	-681-1752	dboucinha@ci.com	dboucinha@ci.com	
6 Number and street (or P.O. box if mail is not deliver			delivered to s	street address) of contact	7 City, town, or post office, sta	te, and ZIP code of contact	
	2 Queen Street East, 20th Floor				Toronto, Ontario, M5C 3G7		
8	Date of action		9 Class	sification and description			
	Tax Year 2021			Non-taxable distribution			
10	CUSIP number	11 Serial number(s	.) .)	12 Ticker symbol	13 Account number(s)		
P	N/A art II Organizatio	N/A		N/A	N/A back of form for additional qu	estions	
14					gainst which shareholders' owne		
17	the action ►				ders throughout the 2021 t		
					eturn of capital that occurre		
		the 2021 tax	-		cturit of capital that occurs		
			ubie year.				
15	Describe the quantita	tive effect of the organ	nizational act	ion on the basis of the security i	in the hands of a U.S. taxpaver a	s an adiustment per	
	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 p share or as a percentage of old basis 0.26693 per unit						
			<u> </u>				
16	Describe the calculati	on of the change in b	asis and the	data that supports the calculatio	on, such as the market values of s	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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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