► See separate instructions.

	art Reporting	ssuer					
1	Issuer's name		2 Issuer's employer	2 Issuer's employer identification number (EIN)			
	CI Canadian Inco	me & Growth Fur	N/A	N/A			
			1 Telephone	e No. of contact	5 Email address of co	5 Email address of contact	
			416-	681-1752	dboucinha@ci.	dboucinha@ci.com	
6 Number and street (or P.O. box if mail is not deliver				treet address) of contact	7 City, town, or post offi	ce, state, and ZIP code of contact	
	2 Queen Street East, 20th Floor			Toronto, On		tario, M5C 3G7	
8	Date of action		9 Class	ification and description			
	Tax Year 2021			Non-taxable distribution			
10	CUSIP number	11 Serial number(s)		12 Ticker symbol	13 Account number(s)		
	N/A	N/A		N/A	N/A		
Pa			additional		ee back of form for addition	al questions.	
14					te against which shareholders'	· · · · · · · · · · · · · · · · · · ·	
	the action ►				nolders throughout the 20	-	
					e return of capital that or	· · · · · · · · · · · · · · · · · · ·	
		1	-	unit information of th	e fetumi of capital that oc		
		the 2021 taxa	ble year.				
15	Describe the guantitat	tive offect of the organ	izational acti	on on the basis of the secur	ity in the hands of a U.S. taxpa	war as an adjustment per	
15	iyer as an aujustment per						
	share or as a percenta	age of old basis \blacktriangleright 0.	14/68 per	unit			
16	Describe the calculation	on of the change in ba	sis and the c	data that supports the calcul	ation, such as the market valu	es of securities and the	
	valuation dates	N/A					
	Demonstrate Destant	A -+ N-+			0 / 11 077777	Form 8937 (12-2017)	
⊢or	Paperwork Reduction	Act Notice, see the s	eparate ins	tructions.	Cat. No. 37752P	Form 0931 (12-2017)	

Form 89	937 (12-2	017)			Page 2	
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