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

E	art I Reporting I	ssuer		<u> </u>	-					
1	Issuer's name		2 Issuer's employer identification number (EIN)							
	CI Canadian Incom	me & Growth Fu	N/A							
3	Name of contact for add	Name of contact for additional information		ne No. of contact	5 Email address of contact					
Duarte Boucinha		416-681-1752		dboucinha@ci.com						
6	6 Number and street (or P.O. box if mail is not del			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	ssification and description						
	Tax Year 2021	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					
Р	Part II Organizational Action Attach additional statements if needed. See back 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 ►				nolders throughout the 2021 taxation year.					
					e return of capital that occurred throughout					
		the 2021 tax	<u>able year.</u>							
15	Describe the quantitat share or as a percenta		rity in the hands of a U.S. taxpayer as an adjustment per							
_										
_										
_										
16	Describe the calculation	on of the change in ${ m k}$ ${ m N}/{ m A}$	pasis and the	e data that supports the calcul	lation, such as the market values of securities and the					
_										
_										
_										
_										
_										

47		and the black of the second of			IDC
17 Li	ist the	applicable Internal Revenue Code section	n(s) and subsection(s) upon which the tax treatment is based		
					312 and 316
1 8 C	an anv	resulting loss be recognized? ► N/A	Λ		
	an any				
1 9 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 and all
		penalties of perjury, I declare that I have exan it is true, correct, and complete. Declaration of			
Sign		-16 1			
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