► See separate instructions.

Reporting Issuer Issuer's name						2 Issuer's employer identification number (EIN)				
		e Managed Corpor		N/A						
3	Name of contact for a	dditional information	4 I elephoi	Telephone No. of contact		5 Email address of contact				
Duarte Boucinha			416	416-681-1752		dboucinha@ci.com				
6 Number and street (or P.O. box if mail is not delivered to str				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 Clas	9 Classification and description						
	Tax Year 2021			Non-taxable distri		ibution				
10	CUSIP number <b>11</b> Serial number(s)		 S)	12 Ticker symbol		13 Account number(s)				
6	N/A	N/A		N/A		N/A				
	-			al statements if needed. Se						
14	-				-	areholders' ownership is measured for				
	the action ►				0	out the 2021 taxation year.				
	See question 15 for per unit information of the return of capital that occurred throughout									
		the 2021 tax	able year.							
15		tative effect of the orgative effect of the orgative effect of the orgative of old basis ►			ty in the hands of a	U.S. taxpayer as an adjustment per				
16	Describe the calcula valuation dates ►	ation of the change in b $\mathrm{N/A}$	asis and the	data that supports the calcul	ation, such as the m	narket values of securities and the				
_										
-		• • • • • •				Fam. 9027 (10 0017				

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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