► See separate instructions.

Earchain Reporting issuer 1 Issuer's name						2 Issuer's employer identification number (EIN)		
		M		E* T'0)				
3	CI Select Income Managed Corporate Class (FT8) 3 Name of contact for additional information 4 Telephone No. of contact					N/A 5 Email address of contact		
J								
Duarte Boucinha				-681-1752		dboucinha@ci.com		
6 Number and street (or P.O. box if mail is not delivered to street				street address) of contact	7	7 City, town, or post office, state, and ZIP code of contact		
	2 Queen Street E	last, 20th Floor				Toronto, Ontario, M5C 3G7		
8	Date of action			sification and description				
	Tax Year 2021			Non-taxable distri		ibution		
10	CUSIP number	11 Serial number(5)	12 Ticker symbol		3 Account number(s)		
	N/A	N/A		N/A		N/A		
						of form for additional questions.		
14	Describe the organiz the action ►				-	t which shareholders' ownership is measured for		
						throughout the 2021 taxation year.		
		the 2021 tax		r unit information of the	e return	of capital that occurred throughout		
			able year.					
15	Describe the quantit	ative effect of the orga	nizational ac	tion on the basis of the secur	rity in the	hands of a U.S. taxpayer as an adjustment per		
	share or as a percen							
16		-	asis and the	data that supports the calcul	lation, su	ch as the market values of securities and the		
	valuation dates \blacktriangleright	N/A						
_						Form 8037 (10.0017)		

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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