## 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	lssuer		·	-				
1	Issuer's name		2 Issuer's employer identification number (EIN)						
	CI Select Income	Managed Corpor	N/A						
3	Name of contact for add			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 deli			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	2021		Non-taxable di	istribution				
10	CUSIP number	11 Serial number(	s)	12 Ticker symbol	13 Account number(s)				
	N/A	N/A	1	N/A	N/A				
Р	Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.								
14	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 ►				olders throughout the 2021 taxation year.				
_					e return of capital that occurred throughout				
_		the 2021 tax	<u>tabie year.</u>						
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15	Describe the quantitat share or as a percenta	ty in the hands of a U.S. taxpayer as an adjustment per							
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16	Describe the calculation	on of the change in ${ m N/A}$	pasis and the	e data that supports the calcula	ation, such as the market values of securities and the				
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47		and the black of the second of	//		IDC	
<b>17</b> Li	ist the	applicable Internal Revenue Code section	n(s) and subsection(s) upon which the tax treatment is based			
					312 and 316	
1 <b>8</b> C	an anv	resulting loss be recognized? ► N/A	Λ			
	an any					
1 <b>9</b> 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	
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any k					
Sign		<del>-16</del> ,				
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