► See separate instructions.

Ρ	ant Reporting	Issuer					
1	Issuer's name				2 Issuer's employer ide	ntification number (EIN)	
	CI Select 70i30e N	Managed Portfolio	N/A	N/A			
3	Name of contact for ad		<b>^</b>	e No. of contact	5 Email address of conta	5 Email address of contact	
Duarte Boucinha			416	-681-1752	dboucinha@ci.cor	dboucinha@ci.com	
6 Number and street (or P.O. box if mail is not delivered				street address) of contact	7 City, town, or post office, s	state, and ZIP code of contact	
	2 Queen Street East, 20th Floor				Toronto, Ontari	o, M5C 3G7	
8	Date of action		9 Class	sification and description			
	Tax Year 2021			Non-taxable distribution			
10	CUSIP number	11 Serial number(s	)	12 Ticker symbol	13 Account number(s)		
D	N/A	N/A		N/A	N/A		
	-				back of form for additional of against which shareholders' ow	-	
14	the action ►		•		-		
					olders throughout the 2021		
		1	1	r unit information of the	return of capital that occur	red throughout	
		the 2021 taxa	able year.				
15					y in the hands of a U.S. taxpayer	as an adjustment per	
	share or as a percenta	age of old basis $\blacktriangleright 0$	.18146 pe	r unit			
16	Describe the calculati	on of the change in ba	asis and the	data that supports the calculat	tion, such as the market values o	of securities and the	
	valuation dates >	N/A					
		i					
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	Cat. No. 37752P	Form <b>8937</b> (12-2017)	

Form 89	937 (12-2	017)			Page <b>2</b>
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