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

Р	art I Reporting	Issuer							
1	Issuer's name				2 Issuer's employer idea	ntification number (EIN)			
	CI Select 80i20e N	Managed Portfolio	N/A	N/A					
3				ne No. of contact	5 Email address of contact	;t			
	Duarte Boucinha		416-681-1752		dboucinha@ci.com	dboucinha@ci.com			
6	6 Number and street (or P.O. box if mail is not of 2 Queen Street East, 20th Floor			street address) of contact	7 City, town, or post office, s	7 City, town, or post office, state, and ZIP code of contact			
					Toronto, Ontario	Toronto, Ontario, M5C 3G7			
8	Date of action		9 Classification and description						
	Tax Year 2021			Non-taxable	distribution	tribution			
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)				
	N/A	N/A	L	N/A	N/A				
P	art II Organizatio	onal Action Attac	h additiona	l statements if needed.	ee back of form for additional q	uestions.			
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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 ► A non-taxable distribution was made to shareholders throughout the 2021 taxation year.								
					ne return of capital that occur				
		the 2021 tax	-						
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15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustre share or as a percentage of old basis ► 0.20696 per unit									
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16	Describe the calculativaluation dates ►	on of the change in b ${ m N}/{ m A}$	asis and the	data that supports the calc	ılation, such as the market values of	securities and the			
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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 base		
					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 ,			
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