See separate instructions.

Part Beporting Issue

P	ant Reporting	Issuer						
1	Issuer's name				2 Issuer's employer identification	number (EIN)		
	CI U.S. Dividend	US\$ Fund (IT8)			N/A			
3	Name of contact for add	ditional information	4 Telephor	e No. of contact	5 Email address of contact			
Duarte Boucinha 41				-681-1752	dboucinha@ci.com			
6 Number and street (or P.O. box if mail is not delivered to 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	Toronto, Ontario, M5C 3G7		
8	Date of action		9 Class	sification and description				
Tax Year 2021 Non-taxable distribution				stribution				
10	CUSIP number	11 Serial number(s	;)	12 Ticker symbol	13 Account number(s)			
	N/A	N/A		N/A	N/A			
P					e back of form for additional questions			
	-				· · · · · · · · · · · · · · · · · · ·			
14	-				e against which shareholders' ownership is			
	the action ►	A non-taxab	le distribu	tion was made to shareh	olders throughout the 2021 taxation	year.		
		See question	15 for pe	r unit information of the	return of capital that occurred thro	ughout		
		the 2021 tax	1		ł	-0		
		une 2021 tax	abie year.					
15	Describe the quantitat	tive effect of the orga	nizational act	tion on the basis of the securi	ty in the hands of a U.S. taxpayer as an adju	stment per		
share or as a percentage of old basis ► 0.73032 per unit								
16	Describe the coloulati	on of the change in h	naio and tha	data that augments the colouis	tion such as the market values of acquirities	and the		
16		-	asis and the	data that supports the calcula	tion, such as the market values of securities	; and the		
	valuation dates \blacktriangleright	N/A						
_								

For Paperwork Reduction Act Notice, see the separate Instructions.

Form 89	937 (12-2	017)			Page 2
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