► See separate instructions.

	art Reporting	Issuer					
1	Issuer's name		2 Issuer's employer ic	2 Issuer's employer identification number (EIN)			
	CI DoubleLine C	ore Plus Fixed Ind	N/A	N/A			
				e No. of contact	5 Email address of cont	act	
Duarte Boucinha			416	-681-1752	dboucinha@ci.co	dboucinha@ci.com	
6 Number and street (or P.O. box if mail is not deliver			delivered to s	street address) of contact	7 City, town, or post office	, state, and ZIP code of contact	
	2 Queen Street East, 20th Floor				Toronto, Onta	rio, 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 art II Organizatio	N/A		N/A	e back of form for additional	questions	
14					e against which shareholders' o	•	
	the action ►				olders throughout the 202		
					0	· · · · · · · · · · · · · · · · · · ·	
		the 2021 tax		r unit information of the	e return of capital that occu		
			abie year.				
15	Describe the quantita	tive effect of the orac	nizational act	tion on the basis of the securi	ity in the hands of a U.S. taxpaye	er as an adjustment per	
15	share or as a percent				ity in the hands of a 0.5. taxpaye	as an aujustment per	
	share of as a percent		1.01455 pe	i uiiit			
						e	
16		-	asis and the	data that supports the calcula	ation, such as the market values	of securities and the	
	valuation dates \blacktriangleright	N/A					
For	Paperwork Reduction	Act Notice. see the	separate Ins	structions.	Cat. No. 37752P	Form 8937 (12-2017)	

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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