► See separate instructions.

	Issuer's name	ssuer				2 Issuer's employer identification number (EIN)				
•										
	CI DoubleLine To			N/A						
3	Name of contact for add	ditional information	4 Telephone No. of contact			5 Email address of contact				
	Duarte Boucinha		416	416-681-1752		dboucinha@ci.com				
6	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 3G7				
8	Date of action		9 Classification and description							
	Tax Year 2021			Non-taxable distri		ibution				
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	1	3 Account number(s)				
	N/A	N/A		N/A		N/A				
Pa		-			ee back	s of form for additional questions.				
14	-					st which shareholders' ownership is measured for				
the action ► A non-taxable distribution was made to shareholders throughout the 2021 taxation year.										
	See question 15 for per unit information of the return of capital that occurred throughout									
	the 2021 taxable year.									
			,							
15	Describe the quantitative effect of the organizational action on the basis of the security in the ha					e hands of a U.S. taxpayer as an adjustment per				
share or as a percentage of old basis ► 0.10758 per unit										
			-							
	-									
16		-	asis and the	data that supports the calcu	ilation, su	uch as the market values of securities and the				
	valuation dates	N/A								

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	Signa	ture ►		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