► See separate instructions.

P	art Reporting	ssuer						
1	Issuer's name		2 Issuer's employer identification number (EIN)					
	CI G5 20i 2036 (2 Fund (F)	N/A					
3				e No. of contact	5 Email address of contact			
	Duarte Boucinha			-681-1752	dboucinha@ci.com			
6	Number and street (or P.O. box if mail is not delivered to street address) of cor			street address) of contact	7 City, town, or post office, state, and ZIP code of contact			
	15 York Street, 2r	nd floor			Toronto, Ontario, M5J 0A3			
8	Date of action		9 Class	sification and description				
	Tax Year 2022 Non-t			Non-taxable o	listribution			
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)			
	N/A	N/A N/A		N/A	N/A			
P;					ee back of form for additional questions.			
_								
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 2022 taxation year.								
					<i>v</i>			
	See question 15 for per unit information of the return of capital that occurred throughout the 2022 taxable year.							
15	Describe the quantitat	tive effect of the ora	nizational act	rity in the hands of a U.S. taxpayer as an adjustment per				
share or as a percentage of old basis 0.39886 per unit								
			-					
16	Describe the calculati	on of the change in h	acia and the	lation, such as the market values of accurities and the				
16	valuation dates ►	N/A	asis and the	uata that supports the calcu	lation, such as the market values of securities and the			
		2 () 2 2						
_								

Form	8937 (12-	2017)		Page 2					
Pa	rt II	Organizational Action (continued)							
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to	reatment is based ▶	►					
				312 and 316					
18	Can an	resulting loss be recognized? \blacktriangleright N/A							
40			1. I	N/A					
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	IN/Λ					
	Und	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and							
<u>.</u>		belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.							
Sigr Her	<u> </u>		Date March 31, 2022						
	Sign								
	Print	your name Darie Urbanky	Title President	and Chief Operating Officer					
Pai		Print/Type preparer's name Preparer's signature	Date	Check if PTIN					
	a parer			self-employed					
	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