► See separate instructions.

CI North American Dividend Fund (FT8) N/A 3 Name of contact for additional information 4 Telephone No. of contact 5 Email address of contact Duarte Boucinha 416-681-1752 dboucinha@ci.com	ication number (FIN)		
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Duarte Boucinha 416-681-1752 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 15 York Street, 2nd floor 7 City, town, or post office, state 8 Date of action 9 Classification and description Tax Year 2022 Non-taxable distribution 10 CUSIP number 11 Serial number(s) 12 Ticker symbol 13 Account number(s) N/A N/A N/A N/A Part II Organizational Action Attach additional statements if needed. See back of form for additional que 14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' owners the action > A non-taxable distribution was made to shareholders throughout the 2022 tax See question 15 for per unit information of the return of capital that occurred			
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See question 15 for per unit information of the return of capital that occurred			
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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 adjustment per		
share or as a percentage of old basis \triangleright 0.15065 per unit	an adjaotiment per		
16 Describe the calculation of the change is basis and the data that supports the calculation, such as the market values of as	ourition and the		
16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of se valuation dates ► N/A	cunties and the		
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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	r penalties of perjury, I declare that I have examined this return, including accompanying sche	dules and statements	, and to the best of my knowledge and		
<u>.</u>		it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infor	mation of which prepa	arer has any knowledge.		
Sigr Her	<u> </u>	Signature Date		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