► See separate instructions.

Ρ	art Reporting	ssuer							
1	Issuer's name				2 Issuer's employer identification number (E	N)			
	CI Conservative I	ncome Personal I	N/A						
3	Name of contact for add	ditional information	4 Telephor	e No. of contact	5 Email address of contact				
	Duarte Boucinha			-681-1752	dboucinha@ci.com				
6	Number and street (or F	P.O. box if mail is not	street address) of contact	7 City, town, or post office, state, and ZIP code of contact					
15 York Street, 2nd floor					Toronto, Ontario, M5J 0A3				
8	Date of action		9 Class	sification and description		-			
	Tax Year 2022			Non-taxable di	ribution				
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					· · · · · · · · · · · · · · · · · · ·	 r			
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.									
	See question 15 for per unit information of the return of capital that occurred throughout								
	the 2022 taxable year.								
						-			
15	Describe the quantitat	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 ► 0.12269 per unit									
16	Describe the calculation	on of the change in b	asis and the	data that supports the calcula	ation, such as the market values of securities and the				
	valuation dates >	N/A							
					2007				

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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>		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