► See separate instructions.

Ρ	Reporting	Issuer				
1	Issuer's name		2 Issuer's employer identification number (EIN)			
	CI Select Income	Managed Corpor	N/A			
3	Name of contact for add	ditional information	4 Telephor	ne No. of contact	5 Email address of contact	
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 15 York Street, 2nd floor				7 City, town, or post office, state, and ZIP code of contact	
					Toronto, Ontario, M5J 0A3	
8	Date of action		9 Class	sification and description		
	Tax Year 2022			Non-taxable dis	tribution	
10	CUSIP number	SIP number 11 Serial number(s)		12 Ticker symbol	13 Account number(s)	
	N/A	N/A		N/A	N/A	
Pa				-	back of form for additional questions.	
	the action ►	against which shareholders' ownership is measured for olders throughout the 2022 taxation year. return of capital that occurred throughout				
15	Describe the quantitat share or as a percenta		in the hands of a U.S. taxpayer as an adjustment per			
16	Describe the calculation valuation dates ►	on of the change in b N/A	asis and the	data that supports the calculat	ion, such as the market values of securities 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	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