► See separate instructions.

Par	Reporting	ssuer							
1 Is	ssuer's name				2 Issuer's employer ide	ntification number (EIN)			
	CI Select 70i30e N	Ianaged Portfolio	N/A	N/A					
3 Name of contact for additional information 4 Telephor				e No. of contact 5 Email address of cor		pt			
Duarte Boucinha			416	-681-1752	dboucinha@ci.con	dboucinha@ci.com			
6 N	lumber and street (or F	P.O. box if mail is not	7 City, town, or post office, s	tate, and ZIP code of contact					
15 York Street, 2nd floor					Toronto, Ontar	Toronto, Ontario, M5J 0A3			
8 D	Date of action		9 Classification and description						
	Tax Year 2022			Non-taxable d	istribution	ibution			
10 C	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)				
	N/A	N/A		N/A	N/A				
Par					e back of form for additional o	uestions.			
14	Describe the organiza	tional action and, if a	pplicable, the	e date of the action or the dat	e against which shareholders' owr	nership is measured for			
	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 tax	<u>able year.</u>						
15	Describe the quantitat share or as a percenta			ty in the hands of a U.S. taxpayer	as an adjustment per				
	·		F						
16	Describe the calculation valuation dates ►	on of the change in ${ m b} N/{ m A}$	asis and the	data that supports the calcul	ation, such as the market values o	f securities and the			

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	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>		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