► See separate instructions.

	Issuer's name	ssuer			2 Issuaris ampl	over identification number (EIN)	
•	Issuel's hame			2 Issuer's employer identification number (EIN)			
	CI Select 70i30e N		-		N/A		
3	Name of contact for add	ditional information	4 Telephone	No. of contact	5 Email address	of contact	
Duarte Boucinha			416-0	681-1752	dboucinha(dboucinha@ci.com	
6 Number and street (or P.O. box if mail is not delive			delivered to st	treet address) of contact	7 City, town, or pos	st office, state, and ZIP code of contact	
	15 York Street, 2nd floor			Toronto	Toronto, Ontario, M5J 0A3		
8	Date of action		9 Classi	fication and description			
	Tax Year 2022			Non-taxable distribution			
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account numb	 per(s)	
		NT/A		NT / A	NI/	A Contract of the second se	
Pa	N/A art II Organizatio	N/A	additional	N/A statements if needed	N/A See back of form for add		
14	-					ders' ownership is measured for	
17	the action ►				cholders throughout th		
					0	t occurred throughout	
		the 2022 taxa	-		1	0	
15	Describe the quantitat	tive effect of the organ	izational action	on on the basis of the sec	urity in the hands of a U.S. t	axpaver as an adjustment per	
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 adjustr share or as a percentage of old basis ► 0.10110 per unit							
	· · · · · · · · · · · · · · ·		.10110 per	unit			
16	Describe the calculation	on of the change in h	eic and the d	ata that supports the calc	ulation such as the market	values of securities and the	
10	valuation dates >	N/A				values of securities and the	
		11/11					
For	Paperwork Reduction	Act Notice, see the	eparate Inst	ructions.	Cat. No. 37752P	Form 8937 (12-2017	

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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