► See separate instructions.

I Issuer's name CI Marret Alternative Absolute Return Bond Fund (IH)						2 Issuer's employer identification number (EIN)		
						N/A		
3	Name of contact for add			Felephone No. of contact		5 Email address of contact		
Duarte Boucinha			416	416-681-1752		dboucinha@ci.com		
6 Number and street (or P.O. box if mail is not delivered to street				street address) of contact	7	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 Clas	9 Classification and description		Toronto, Ontario, hisjonis		
-						n		
	Tax Year 2022			Non-taxable dist				
10	CUSIP number	11 Serial number(s	5)	12 Ticker symbol	13	Account number(s)		
	N/A	N/A		N/A		N/A		
Pa	-					f form for additional questions.		
14					-	which shareholders' ownership is measured for		
	the action ►					hroughout the 2022 taxation year.		
		the 2022 tax	-	r unit information of th	ne return	of capital that occurred throughout		
			<u>abie year.</u>					
15	Describe the quantitat share or as a percentar	-			urity in the h	ands of a U.S. taxpayer as an adjustment per		
			_					
16	Describe the calculation	on of the change in b	asis and the	data that supports the calcu	ilation such	h as the market values of securities and the		
	valuation dates >	N/A						
		,						
						Earma 8037 (10.0017		

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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>		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