► See separate instructions.

	Issuer's name	Issuer			2 Issuer's empl	oyer identification number (EIN)		
•								
	CI Investment Grade Bond Fund (W)					N/A		
3	Name of contact for add	ditional information	4 Telephor	e No. of contact	5 Email address	of contact		
Duarte Boucinha			416	-681-1752	dboucinha	dboucinha@ci.com		
6 Number and street (or P.O. box if mail is not delive			delivered to	street address) of contact	7 City, town, or pos	7 City, town, or post office, state, and ZIP code of contac		
	15 York Street, 2nd floor				Toronto	, Ontario, M5J 0A3		
8	Date of action			sification and description				
	Tax Year 2022			Non-taxable distribution				
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 Account numb	ver(s)		
					NT/	N		
Pa	N/A art II Organizatio	N/A		N/A	N/A See back of form for add			
14	- -					ders' ownership is measured for		
	the action ►		•		cholders throughout th	-		
					0	t occurred throughout		
		the 2022 tax	-		ne return or cupitar tha			
			<u></u>					
15	Describe the quantitat	ive offect of the organ	nizational ac	tion on the basis of the ase	urity in the hands of a LLC d	avaavar aa aa adjustmaat aar		
15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpa share or as a percentage of old basis ► 0.14226 per unit						axpayer as an aujustment per		
	share of as a percente		.14220 pe	runit				
16	Describe the calculation	on of the change in ba	asis and the	data that supports the calc	ulation, such as the market	values of securities and the		
	valuation dates \blacktriangleright	N/A						
For	Paperwork Reduction	Act Notice, see the	separate Ins	structions.	Cat. No. 37752P	Form 8937 (12-2017		

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	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