► See separate instructions.

P	art Reporting	issuer							
1	Issuer's name				2	2 Issuer's employer identification number (EIN)			
	CI DoubleLine To	otal Return Bond		N/A					
3	Name of contact for add	ditional information	4 Telephon	Telephone No. of contact		5 Email address of contact			
	Duarte Boucinha			416-681-1752		dboucinha@ci.com			
6	Number and street (or F	delivered to s	street address) of contact	7	City, town, or post office, state, and ZIP code of contact				
	15 York Street, 2r	nd floor				Toronto, Ontario, M5J 0A3			
8	Date of action		9 Classification and description						
	Tax Year 2022			Non-taxable distri		bution			
10	CUSIP number	11 Serial number(s	)	12 Ticker symbol	13	3 Account number(s)			
	N/A	N/A		N/A		N/A			
P					e back				
<ul> <li>Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.</li> <li>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.</li> </ul>									
									See question 15 for per unit information of the return of capital that occurred throughout
	the 2022 taxable year.								
15	Describe the quantitat	Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjust							
	share or as a percenta								
			<b>i</b>						
16	Describe the calculati valuation dates ►	on of the change in ba ${ m N/A}$	asis and the	data that supports the calcula	lation, suc	ch 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