Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

| P | art I Reporting I | ssuer | | | • | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------|-------------------------------------------------|---------------------------------|--------------------------------------------------------------|--|--|--|--|--|
| 1 | Issuer's name | | 2 Issuer's employer identification number (EIN) | | | | | | | |
| | CI Munro Alterna | tive Global Grov | N/A | | | | | | | |
| 3 | Name of contact for add | ditional information | 4 Telephor | ne No. of contact | 5 Email address of contact | | | | | |
| | Duarte Boucinha | | 416-681-1752 | | dboucinha@ci.com | | | | | |
| 6 | 6 Number and street (or P.O. box if mail is not de | | | street address) of contact | 7 City, town, or post office, state, and ZIP code of contact | | | | | |
| | 15 York Street, 2n | nd floor | | | Toronto, Ontario, M5J 0A3 | | | | | |
| 8 | Date of action | | 9 Classification and description | | | | | | | |
| | Tax Year 2022 | | | Non-taxable distribution | | | | | | |
| 10 | CUSIP number | 11 Serial number(| s) | 12 Ticker symbol | 13 Account number(s) | | | | | |
| | N/A | N/A | 1 | N/A | N/A | | | | | |
| Р | Part II Organizational Action Attach additional statements if needed. See back of form for additional questions. | | | | | | | | | |
| 14 | 3 | | | | | | | | | |
| | the action A non-taxable distribution was made to shareholders throughout the 2022 taxation year. | | | | | | | | | |
| | | | | r unit information of the | e return of capital that occurred throughout | | | | | |
| | | the 2022 tax | <u>able year.</u> | | | | | | | |
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| 15 | Describe the quantitat | ive offect of the orac | nizational ac | tion on the basis of the securi | ity in the hands of a LLS taxpayor as an adjustment per | | | | | |
| 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 percentage of old basis ► 0.25197 per unit | | | | | | | | | | |
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| 16 | Describe the calculation | on of the change in b | asis and the | data that supports the calcula | ation, such as the market values of securities and the | | | | | |
| | valuation dates ► | N/A | | | | | | | | |
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| Par | t II | C | Organizational Action (continued) | | | · - | |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-----------------------------------------------------------|-------------------------------------------------|-----------------------------|---------------------------------------|--|
| 17 | List | the a | applicable Internal Revenue Code section | (s) and subsection(s) upon which the tax tro | eatment is based ▶ | IRC section 301(c)(2), 312 and 316 | |
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| 18 | Can | any | resulting loss be recognized? ► N/A | 1 | | | |
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| 19 | Prov | vide a | any other information necessary to impler | nent the adjustment, such as the reportable | e tax vear ▶ | N/A | |
| | | | any earler information necessary to impler | non and adjactment, each ac and reportable | | | |
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| | U | Jnder | penalties of periury. I declare that I have exan | nined this return, including accompanying sched | ules and statements. | and to the best of my knowledge and | |
| | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my know belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. | | | | | | |
| Sign | . | | | 2022 | | | |
| Here | 9 S | Signat | ure ▶ | Date March 31, | <u> </u> | | |
| | P | Print v | our name ▶ Darie Urbanky | Title President | and Chief Operating Officer | | |
| Paid | | | Print/Type preparer's name | Preparer's signature | Date | Check if PTIN | |
| Pre | | er↓ | | | | self-employed | |
| Use | | | Firm's name | | | Firm's EIN ▶ | |
| Send | Form | n 893 | Firm's address ► 37 (including accompanying statements) t | o: Department of the Treasury, Internal Re | venue Service, Oad | Phone no. den, UT 84201-0054 | |