## 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 Reporting	Issuer								
1	Issuer's name		2 Issuer's e	2 Issuer's employer identification number (EIN)						
	CI Mosaic ESG B	Salanced Growth	ı	N/A						
3				ne No. of contact	5 Email addre	ess 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, 2nd floor				Toron	Toronto, Ontario, M5J 0A3				
8	Date of action	ate of action		9 Classification and description						
	Tax Year 2022 Non-taxable dis			distribution	tribution					
10	CUSIP number	11 Serial number(	s)	12 Ticker symbol	13 Account no	13 Account number(s)				
	N/A	N/A N/A		N/A	l l	N/A				
Р				al statements if needed. S						
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.									
						that occurred throughout				
		the 2022 tax	-		•					
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Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an share or as a percentage of old basis ► 0.00731 per unit										
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16	Describe the calculation valuation dates ▶	on of the change in b ${ m N/A}$	asis and the	data that supports the calcu	llation, such as the mar	ket values of securities and the				
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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
	_					
18	Can	any	resulting loss be recognized? ► N/A	1		
-						
-						
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		
-						
	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
	b			preparer (other than officer) is based on all inform		
Sign	.			M . 1 21	2022	
Here	<b>9</b>   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