► See separate instructions.

	art Reporting	ssuer			0 looverle emple			
1	Issuer's name				2 issuer's emplo	oyer identification number (EIN)		
	CI International E	Equity Value Priva	te Pool (I)		N/A	N/A		
3	3 Name of contact for additional information 4 Te			No. of contact	5 Email address of	of contact		
	Duarte Boucinha		416-	681-1752	dboucinha@)ci.com		
6	 6 Number and street (or P.O. box if mail is not delivered to street address) of 2 Queen Street East, 20th Floor 			treet address) of contact	7 City, town, or post	7 City, town, or post office, state, and ZIP code of contact		
					Toronto,	Toronto, Ontario, M5C 3G7		
8	Date of action		9 Classi	fication and description	·			
	Tax Year 2019			Non-taxable	distribution	ibution		
10	CUSIP number	11 Serial number(s	;)	12 Ticker symbol	13 Account numb	er(s)		
	N/A	N/A		N/A	N/A			
Pa	-			· · · · · · · · · · · · · · · · · · ·	See back of form for addi			
14	-					ers' ownership is measured for		
	the action ►	A non-taxab	le distributi	ion was made to share	cholders throughout the	e 2019 taxation year.		
				unit information of the	he return of capital that	occurred throughout		
		the 2019 tax	<u>able year.</u>					
15		Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per						
	share or as a percenta	age of old basis <a>().25422 per	unit				
16			asis and the d	ata that supports the calc	ulation, such as the market v	alues of securities and the		
	valuation dates \blacktriangleright	N/A						
-	Demonstration of the state	A at May's a state			0 + ++	Form 8937 (12-2017)		
For	Paperwork Reduction	ACT NOTICE, SEE THE	separate Inst	ructions.	Cat. No. 37752P	Form 0931 (12-2017)		

Form 89	937 (12-2	2017)			Page 2
Part		Organizational Action (continued)			,
17 L	_ist the	applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	eatment	is based I	 IRC section 301(c)(2), 312 and 316
					512 and 510
		27/1			
18 (Can any	v resulting loss be recognized? ►N/A			
19 F	Provide	any other information necessary to implement the adjustment, such as the reportabl	e tax yea	ar 🕨	N/A
	Unde belief	r penalties of perjury, I declare that I have examined this return, including accompanying scheor, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all inform	lules and mation of	statements which prepa	, and to the best of my knowledge and arer has any knowledge.
Sign		$-\mathbf{h}$			
Here	e Signature ►		Date Mar 31, 2019		
				D. 11	
	Print	your name ► Darie Urbanky Print/Type preparer's name Preparer's signature	Title ► Date	Presid	ent and Chief Operating Office
Paid	0 46 -				Check if self-employed
Prep Use		Firm's name	·		Firm's EIN ►
000	Juny	Firm's address ►			Phone no.