► See separate instructions.

P	art Reporting	ssuer						
1 Issuer's name						2 Issuer's employer identification number (EIN)		
	Harbour Global C	Growth & Income		N/A				
3				Telephone No. of contact		5 Email address of contact		
Duarte Boucinha			416-	416-681-1752		dboucinha@ci.com		
6 Number and street (or P.O. box if mail is not delivered				ed to street address) of contact		7 City, town, or post office, state, and ZIP code of contact		
	2 Queen Street East, 20th Floor			Toronto, Or		onto, Ontario, M5C 3G7		
8	Date of action		9 Classi	9 Classification and description				
	Tax Year 2019			Non-taxable distribution				
10	CUSIP number	11 Serial number(s)	,	12 Ticker symbol	13 Accourt	t number(s)		
	N/A	N/A		N/A		N/A		
Pa			n additional	statements if needed.	See back of form form			
14	-					areholders' ownership is measured for		
	the action ►				-	out the 2019 taxation year.		
					U	tal that occurred throughout		
		the 2019 taxa	-					
			,					
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 share or as a percentage of old basis • 0.21186 per unit							
16			sis and the d	ata that supports the calc	ulation, such as the r	market values of securities and the		
	valuation dates	N/A						
For	Paperwork Reduction	Act Notice, see the s	eparate Inst	ructions.	Cat. No. 37752P	Form 8937 (12-2017		

Form 8937 (12-2017) Page 2									
Pa	rt II	Drganizational Action (continued)							
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax tr	reatment is based ▶	►					
				312 and 316					
		/-							
18	Can an	resulting loss be recognized? ► N/A							
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	N/A					
	Unde	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 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				alei has arry knowledge.					
Her	<u> </u>	ture V	Date ► Mar 31, 2020						
	Print	your name ► Darie Urbanky		and Chief Operating Officer					
Paie Pre	d parer	Print/Type preparer's name Preparer's signature	Date	Check if self-employed					
	e 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