► See separate instructions.

Part	Reporting I	ssuer					
1 Issuer	's name				2 Issuer's employer identification numb	er (EIN)	
Sig	nature Globa	al Income & G	N/A	N/A			
<b>3</b> Name of contact for additional information <b>4</b> Telephon			4 Telephon	e No. of contact	5 Email address of contact		
Duarte Boucinha 416-68			416-681	1-1752	dboucinha@ci.com		
6 Numb	er and street (or P.O. box if mail is not delivered to street address) of contact			7 City, town, or post office, state, and ZIP code of contact			
2 (	Queen Street	East, 20th Floo	or	Toronto, Ontario, M5C 3G7	Toronto, Ontario, M5C 3G7		
8 Date of	of action		9 Class	sification and description			
Tax	x Year 2017			Non-taxable di	stribution		
10 CUSI	P number	11 Serial number(	s)	12 Ticker symbol	13 Account number(s)		
N/	' A	N/A		N/A	N/A		
Part II			ch additiona	-	see back of form for additional questions.		
14 Des	cribe the organiza	tional action and, if a	applicable, the	e date of the action or the da	ate against which shareholders' ownership is measur	ed for	
	action ►				shareholders throughout the 2017		
		taxation ye	ear. See qu	uestion 15 for per u	nit information of the return of capita	al	
		that occur	red throug	ghout the 2017 taxal	ble year.		
		ive effect of the orga age of old basis ►			rity in the hands of a U.S. taxpayer as an adjustment	per	
	cribe the calculation dates ►	on of the change in ${ m k} N/{ m A}$	basis and the	data that supports the calcu	ulation, such as the market values of securities and th	ıe	

Part		Organiza	ational Action (cont	tinued)			
17 L	List the	applicable	Internal Revenue Code	section(s) and subsection(s) up	oon which the tax treatr	nent is based	IRC section 301(c)(2), 312 and 316
40 /	Con on	roculting	loss be recognized?	N/A			
18 (	Carrany	resulting					
<b>19</b> F	Provide	any other	information necessary to	o implement the adjustment, su	ich as the reportable ta	x year ►	N/A
	Unde belief	r penalties of, it is true, c	of perjury, I declare that I ha orrect, and complete. Decla	ave examined this return, including ration of preparer (other than office	accompanying schedules r) is based on all information	and statemer	nts, and to the best of my knowledge and eparer has any knowledge.
Sign		, 0	ΛηΛ				. , , , , , , , , , , , , , , , , , , ,
Here	Signa	ature ►	////		Dat	e► Jan 1	9, 2018
			David Pauli			► EVP	
Paid			preparer's name	Preparer's signature	Titli Da	, <b>,</b> ,	Check if PTIN
Palu							self-employed

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Form 8937 (12-2017)

Preparer		self-employed				
Use 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						