► See separate instructions.

P	art Reporting I	ssuer						
1 Issuer's name						2 Issuer's employer identification number (EIN)		
	CI Marret Alterna	tive Absolute Ret		N/A				
3	Name of contact for add	ditional information	4 Telephor	Telephone No. of contact		5 Email address of contact		
Duarte Boucinha			416-681-1752		ď	dboucinha@ci.com		
6	Number and street (or P	P.O. box if mail is not	delivered to	street address) of contact	7 City	7 City, town, or post office, state, and ZIP code of contact		
15 York Street, 2nd floor						Toronto, Ontario, M5J 0A3		
8	Date of action Tax Year 2023		9 Classification and description					
				Non-taxable distri		ibution		
10	CUSIP number	11 Serial number(s)	12 Ticker symbol	13 A	ccount number(s)		
	N/A	N/A		N/A		N/A		
Pa					ee back of fo	form for additional questions.		
14	Describe the organiza	tional action and, if a	oplicable, the	e date of the action or the da	ate against whi	ich shareholders' ownership is measured for		
	the action ►	A non-taxab	le distribu	tion was made to share	holders thro	bughout the 2023 taxation year.		
						capital that occurred throughout		
		the 2023 tax	-					
			,					
15	Describe the quantitative effect of the organizational action on the basis of the security in the han					ds of a U.S. taxpayer as an adjustment per		
	share or as a percentage of old basis > 0.29273 per unit							
16	Describe the calculation	on of the change in b	asis and the	data that supports the calcu	lation, such as	s the market values of securities and the		
	valuation dates >	N/A						

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Pa	rt II	Organizational Action (continued)							
17		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to	reatment is based ▶	IRC section 301(c)(2),					
				312 and 316					
18	Can an	resulting loss be recognized? \blacktriangleright N/A							
	–			NI/A					
19	Provide	any other information necessary to implement the adjustment, such as the reportab	le tax year ►	N/A					
	Und	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							
		it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infor	mation of which prepa	arer has any knowledge.					
Sigr Her	<u> </u>		Date March 31, 2023						
пег	Sign								
	Drint	your name ► Darie Urbanky	Title President	and Chief Operating Officer					
Pai		Print/Type preparer's name Preparer's signature	Date	Check if PTIN					
	a parer			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