► See separate instructions.

P	art Reporting	ssuer							
1	Issuer's name		:	2 Issuer's employer identification number (EIN)					
	CI DoubleLine To	otal Return Bond		N/A					
3	Name of contact for add	ditional information	4 Telephor	hone No. of contact 5		5 Email address of contact			
	Duarte Boucinha		416	416-681-1752		dboucinha@ci.com			
6	Number and street (or F	2.0. box if mail is not	delivered to	street address) of contact		7 City, town, or post office, state, and ZIP code of contact			
	15 York Street, 2n	ıd floor			Toronto, Ontario, M5J 0A3				
8	Date of action		9 Classification and description						
	Tax Year 2023			Non-taxable d	listribut	bution			
10	CUSIP number	11 Serial number(s	;)	12 Ticker symbol	1	3 Account number(s)			
	N/A	N/A		N/A		N/A			
Pa					ee back	of form for additional questions.			
14	-					-			
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 2023 taxation year.									
	See question 15 for per unit information of the return of capital that occurred throughout								
		the 2023 tax	able year.						
15					rity in the	hands of a U.S. taxpayer as an adjustment per			
share or as a percentage of old basis 0.23385 per unit									
16	Describe the calculation	on of the change in b	asis and the	data that supports the calcul	lation, su	ch as the market values of securities and the			
	valuation dates >	N/A			liacion, ca				

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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	r penalties of perjury, I declare that I have examined this return, including accompanying sche	dules 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