## Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

## Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

| P  | art I Reporting   | Issuer                                |   |   |                  |  |  |  |  |  |
|----|---|---------------------------------------|---|---|------------------|--|--|--|--|--|
| 1  | Issuer's name   |                                       | 2 Iss   | 2 Issuer's employer identification number (EIN) |                  |  |  |  |  |  |
|    | CI Marret Alterna   | tive Enhanced Y                       |   | N/A   |                  |  |  |  |  |  |
| 3  | Name of contact for add   | ditional information                  | 4 Telepho   | Telephone No. of contact                        |                  | ail address of contact                               |  |  |  |  |
|    | Duarte Boucinha   |                                       |   | 416-681-1752                                    |                  | dboucinha@ci.com                                     |  |  |  |  |
| 6  | 6 Number and street (or P.O. box if mail is not deli  |                                       |   | elivered to street address) of contact          |                  | town, or post office, state, and ZIP code of contact |  |  |  |  |
|    | 15 York Street, 2nd floor   |                                       |   |   |                  | Toronto, Ontario, M5J 0A3                            |  |  |  |  |
| 8  | Date of action  | ate of action                         |   | 9 Classification and description                |                  |  |  |  |  |  |
|    | Tax Year 2023 Non-taxable d   |                                       |   |   | distribution     | stribution   |  |  |  |  |
| 10 | CUSIP number  | 11 Serial number(                     | 3)  | 12 Ticker symbol                                | <b>13</b> Ac     | 13 Account number(s)                                 |  |  |  |  |
|    | N/A   | N/A                                   |   | N/A   |                  | N/A  |  |  |  |  |
| Р  |   |                                       |   |   | See back of for  | rm for additional questions.                         |  |  |  |  |
|    |   |                                       |   |   |                  |  |  |  |  |  |
| 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. |                                       |   |   |                  |  |  |  |  |  |
|    |   |                                       |   |   |                  | capital that occurred throughout                     |  |  |  |  |
|    |   | the 2023 tax                          |   |   |                  | <u></u>  |  |  |  |  |
|    |   |                                       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |   |                  |  |  |  |  |  |
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|    |   |                                       |   |   |                  |  |  |  |  |  |
| 15 |   |                                       | effect of the organizational action on the basis of the securi<br>of old basis ► 0.33005 per unit |   |                  | s of a U.S. taxpayer as an adjustment per            |  |  |  |  |
|    |   |                                       |   |   |                  |  |  |  |  |  |
|    |   |                                       |   |   |                  |  |  |  |  |  |
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| _  |   |                                       |   |   |                  |  |  |  |  |  |
| 16 | Describe the calculativaluation dates ►   | on of the change in b ${ m N}/{ m A}$ | asis and the  | data that supports the calc                     | ulation, such as | the market values of securities and the              |  |  |  |  |
|    |   |                                       |   |   |                  |  |  |  |  |  |
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| Par          | t II                            | C           | Organizational Action (continued)                 |  |                       | · -                                   |  |
|--------------|---------------------------------|-------------|---|--|-----------------------|---------------------------------------|--|
| 17           | List                            | the a       | applicable Internal Revenue Code section          | (s) and subsection(s) upon which the tax tr          | eatment is based ▶    | IRC section 301(c)(2),<br>312 and 316 |  |
|              |                                 |             |   |  |                       |                                       |  |
|              |                                 |             |   |  |                       |                                       |  |
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|              |                                 |             |   |  |                       |                                       |  |
|              |                                 |             |   |  |                       |                                       |  |
| 18           | Can                             | anv         | resulting loss be recognized?▶N/A                 | A  |                       |                                       |  |
| 10           | Oan                             | arry        | resulting loss be recognized:                     | -  |                       |                                       |  |
|              |                                 |             |   |  |                       |                                       |  |
|              |                                 |             |   |  |                       |                                       |  |
|              |                                 |             |   |  |                       |                                       |  |
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|              |                                 |             |   |  |                       |                                       |  |
|              |                                 |             |   |  |                       |                                       |  |
| 19           | Prov                            | vide a      | any other information necessary to impler         | ment the adjustment, such as the reportable          | e tax year ▶          | N/A                                   |  |
|              |                                 |             |   |  |                       |                                       |  |
|              |                                 |             |   |  |                       |                                       |  |
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|              |                                 |             |   | nined this return, including accompanying sched      |                       |                                       |  |
| 0:           |                                 | eliet,      | it is true, correct, and complete. Declaration of | preparer (other than officer) is based on all inform | nation of which prepa | arer has any knowledge.               |  |
| Sign<br>Here | .                               |             |   | Date March 31,                                       | 2023                  |                                       |  |
|              |                                 | Signature ▶ |   |  |                       |                                       |  |
|              | Print your name ▶ Darie Urbanky |             |   |  | Title President       | and Chief Operating Officer           |  |
| Paic         |                                 |             | Print/Type preparer's name                        | Preparer's signature                                 | Date                  | Check if PTIN                         |  |
| Pre          | oare                            |             |   |  |                       | self-employed                         |  |
| Use          | On                              | ıly         | Firm's name ► Firm's address ►                    |  |                       | Firm's EIN ▶                          |  |
| Send         | Form                            | n 893       |   | to: Department of the Treasury, Internal Re          | venue Service, Ogo    | Phone no.<br>den, UT 84201-0054       |  |