► See separate instructions.

P	art Reporting	Issuer					
1	Issuer's name		2 Issuer's employer iden	2 Issuer's employer identification number (EIN)			
	CI Marret Alterna	tive Enhanced Yi	N/A				
3	Name of contact for ad	ditional information	4 Telephor	e No. of contact	5 Email address of contact	5 Email address of contact	
Duarte Boucinha			416	-681-1752	dboucinha@ci.com	dboucinha@ci.com	
6	<ul> <li>6 Number and street (or P.O. box if mail is not delivered to street address) of conta</li> <li>15 York Street, 2nd floor</li> </ul>			street address) of contact	7 City, town, or post office, st	ate, and ZIP code of contact	
					Toronto, Ontario, M5J 0A3		
8	Date of action		9 Class	sification and description			
	Tax Year 2023			Non-taxable distribution			
10			)	12 Ticker symbol		13 Account number(s)	
D	N/A	N/A		N/A	N/A		
					back of form for additional qu		
14	-				against which shareholders' own		
	the action ►				olders throughout the 2023 t		
		1	1	r unit information of the	return of capital that occurr	ed throughout	
		the 2023 taxa	able year.				
15					in the hands of a U.S. taxpayer a	as an adjustment per	
	share or as a percenta	age of old basis $\blacktriangleright 0$	.33005 per	r unit			
			_				
16	Describe the coloulati	ion of the obence in h	nois and the	data that augments the calculat	ion, such as the market values of	accuritics and the	
16	valuation dates ►	-			ION, SUCH as the market values of	securities and the	
		N/A					
For	Paperwork Reduction	Act Notice see the	senarate Inc	structions	Cat. No. 37752P	Form <b>8937</b> (12-2017	
	. apermont neuronom		separate me		Out. NO. 011021		

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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			
	<b>–</b>			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>		March 31 2023		
пег	Sign		Date March 31, 2023		
	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